

BOARD OF COUNSELING
QUARTERLY BOARD MEETING
Friday, February 9, 2018 – 10:00 a.m.
Second Floor – Perimeter Center, Board Room 1

10:00 a.m. Call to Order – Kevin Doyle, Ed.D., LPC, LSATP, Chairperson

- I. **Welcome and Introductions**
 - A. Emergency evacuation instructions

- II. **Adoption of Agenda**

- III. **Public Comment**

- IV. **Approval of Minutes**
 - A. Board meeting minutes from November 3, 2017*
 - B. Regulatory minutes from November 2, 2017

- V. **Agency Director’s Report: David E. Brown, D.C.**

- VI. **Chairman Report: Kevin Doyle, Ed.D., LPC, LSATP**
 - A. AASCB Conference

- VII. **Staff Reports**
 - A. Executive Director’s Report: Jaime Hoyle
 - B. Deputy Executive Director’s Report: Jennifer Lang
 - a. Discipline Report
 - C. Licensing Manager’s Report: Charlotte Lenart
 - a. Licensing Report
 - D. Board Counsel Report: James Rutkowski
 - a. Background checks

- VIII. **Committee Reports**
 - A. Board of Health Professions Report: Kevin Doyle
 - B. Regulatory/Legislative Committee Report: Johnston Brendel, Ed.D, LPC, LMFT

- IX. **Unfinished Business**

- X. **New Business**
 - A. Regulatory/Legislative Report: Elaine Yeatts, Senior Policy Analyst
 - a. New Proposed Qualified Mental Health Professionals (QMHP) and Registered Peer Recovery Specialists (RPRS) Regulations
 - B. Next Meeting

1:00 p.m. Adjournment

* Requires Board Action

**Approval of Board of
Counseling Quarterly Board
Meeting Minutes
November 3, 2017**

DRAFT
BOARD OF COUNSELING
QUARTERLY BOARD MEETING
Friday, November 3, 2017

TIME AND PLACE: A meeting of the Virginia Board of Counseling convened on Friday, November 3, 2017, at the Department of Health Professions, 9960 Mayland Drive, 2nd Floor, Board Room 1, Henrico, Virginia.

PRESIDING OFFICER: Kevin Doyle, Ed.D., LPC, LSATP, Chairperson

BOARD MEMBERS PRESENT: Barry Alvarez, LMFT
Johnston Brendel, Ed.D., LPC, LMFT
Jane Engelken, LPC, LSATP, Vice-Chairperson
Natalie Harris, LPC, LMFT
Danielle Hunt, LPC
Bev-Freda L. Jackson, Ph.D., Citizen Member
Vivian Sanchez-Jones, Citizen Member
Maria Stransky, LPC, CSAC, CSOTP
Terry R. Tinsley, Ph.D., LPC, LMFT, CSOTP, NCC
Holly Tracy, LPC, LMFT
Tiffinee Yancey, Ph.D., LPC

STAFF PRESENT: Tracey Arrington-Edmonds, Licensing Specialist
David E. Brown, D.C., DHP Director
Christy Evans, Discipline Case Specialist
Jaime Hoyle, J.D., Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Licensing Manager
Elaine Yeatts, DHP Senior Policy Analyst

COUNSEL PRESENT: James Rutkowski, Assistant Attorney General

OTHERS PRESENT: Becky Bowers-Lanier
Katie Hellebush, Virginia Association of Clinical Counselors (VACC)
Kelly Fitzgerald, National Association of Social Workers, Virginia Chapter (NASW-VA)
Debra Riggs, NASW-VA

CALL TO ORDER: WELCOME & INTRODUCTIONS: Dr. Doyle called the meeting to order at 10:04 a.m. and read the emergency evacuation instructions.

Dr. Doyle welcomed the Board members, staff, the general-public in attendance.

ADOPTION OF AGENDA: Recommendation to revise the agenda and move item C of the new business to after the agency director's report was accepted.

PUBLIC COMMENT: None.

APPROVAL OF MINUTES:

A motion was made by Dr. Brendel and seconded by Ms. Stransky to approve the Board meeting minutes from August 17, 2017 and August 18, 2017. The motion passed unanimously.

A motion was made by Dr. Brendel and seconded by Ms. Tracy to approve the Regulatory Advisory Panel minutes from June 26, 2017. The motion passed unanimously.

DHP DIRECTOR'S REPORT:

Dr. Brown stated that he feels it is important for him to attend Board meetings and hear the issues first-hand, and secondly to show respect to the Board and its members.

Dr. Brown reported on three topics:

- New space for the agency: Current departments within the agency will be moving in 2018 to the additional space the agency has obtained on the first floor of the building. The additional space will allow for the Boards on the third floor that are over-crowded to reorganize their staff into a cohesive area instead of being fragmented all over the floor, and/or in tight spaces.
- Training videos: DHP is working on the production of training videos to assist board members in better conducting their responsibilities better and according to the agency's requirements. The types of videos currently being produced focus on probable cause, confidentiality conflicts of interest, and the responsibilities of a chair. The probable cause review video will be completed in a few weeks and suggestions for other trainings are welcome.

Letter sent to Governor McAuliffe from Dr. Angel Cabrera, President of George Mason University: Dr. Brown asked the Board to review the letter and discuss options of the proposed requirement for CACREP accreditation for educational programs.

CHAIRMAN'S REPORT:

Dr. Doyle thanked Board members and staff for attending the Board development day and looks forward to more development days in the future.

Dr. Doyle opened the floor to discuss the letter sent to Governor McAuliffe and the Board's options. Specifically, the options are: do nothing and let the process continue; withdraw the proposal and re-introduce it at a later date; or withdraw the stage but keep the action. By doing nothing the proposal may be denied and the Board would have to go back through the complete regulatory process again, or a professional association can lobby for the proposal as written. The Federal government has weighed in by requiring employees to have completed a CACREP degree program in order to be employed at some of their medical agencies and hospitals.

A motion was made by Dr. Tinsley to withdraw the stage but keep the action, allowing more schools time to understand the process and cost. The motion was seconded by Ms. Tracy and passed with 7 members in agreement, 4

opposed, and 1 abstention.

**EXECUTIVE DIRECTOR'S
REPORT:**

Ms. Hoyle welcomed everyone in attendance and reported that the Board's operating budget report as of September 30, 2017 was provided in the agenda packet. Ms. Hoyle addressed the letter from Dr. Brown regarding the need to adjust fees. As the letter explains, the law requires the boards to look at the cash balance to determine if the cash on hand is 10% higher or lower than the expenditures. If it is 10% higher, then a one-time fee renewal decrease is required. If it is 10% lower, a fee increase is required. This Board currently does not need to adjust fees at all.

The current budget reflects that the Board has already received half of its budgeted amount of application fees. This reflects the fact that applications continue to increase for these boards. It also shows that the Board is spending money on overtime. This overtime is not required and indicates how willing and conscientious staff is to ensure the Board remains responsive to applicants and licensees, and processes applications to meet agency performance measures.

Ms. Hoyle highlighted the fact that the number of licensees and the number of applications continue to grow at a steady pace. The Board is seeing a particular uptick in CSAC and LSATP license applications.

Ms. Hoyle asked Board members to let her know if they are interested in attending the American Association of State Counseling Boards (AASCB) Conference in San Antonio.

**DEPUTY EXECUTIVE
DIRECTOR'S DISCIPLINE
REPORT:**

Ms. Lang reported that an increase of discipline cases is expected with the new registry of CPRS and QMHP. The current received, open and closed report as of October 5, 2017 was provided in the agenda packet. She thanked the members that work with the disciplinary staff in order to keep the cases up-to-date per agency requirements.

**LICENSING MANAGER'S
REPORT:**

Mrs. Lenart reported as of the end of four quarter of the 2018 Fiscal Year (July 1, 2017 – September 30, 2017), the Board of Counseling regulated 8,177 licensees and certificates. As of the last Board meeting on August 18, 2017, the Board licensed, certified or approved residency for 714 individuals. Ms. Lenart thanked the Board of Counseling staff for their hard work and dedication to making consistent improvements to the process, applications and overall customer service. Board staff is diligently working on the implementation of online application for all licensees, certifications and registrations.

On October 18, 2017, she presented information on QMHP and Registered Peer Recovery Specialists at the Virginia Association of Community-Based Providers Conference in Roanoke. Although there were many questions and concerns related to the QMHP and Peers registry, overall, the feedback was very positive.

BOARD COUNSEL REPORT:

Mr. Rutkowski had no report but wanted to remind the Board of the code of ethics requirements, especially pertaining to conflicts of interest. He reminded the members to always behave ethically and refrain from any appearance of impropriety, as well as to refrain from becoming involved in investigations and cases where there may be a conflict of interest.

BOARD OF HEALTH PROFESSIONS REPORT:

Dr. Doyle reported that a study regarding licensure for art therapists was conducted by the Board of Health Professions and requested the regulatory committee research and review the studies regarding art therapists holding a separate credential at their next scheduled meeting.

REGULATORY COMMITTEE REPORT:

Dr. Brendel thanked everyone that attended the regulatory committee on November 2, 2017 and the public that attended and spoke at the meeting. The Committee received public comment mainly on CSAC and QMHP-related issues. Dr. Brendel stated that the Committee discussed QMHP variances and whether persons who have a QMHP through a variance, which means they did not meet the current DBHDS requirements, would be grandfathered into the registry. The Committee determined that persons already deemed a QMHP by employers, DBHDS, and DMAS, regardless of whether they met the qualifications or received a variance, would be eligible to apply for registration as a QMHP through our grandfather provision.

The Committee also discussed an issues raised in public comment regarding whether a QMHP-C has the ability to become a QMHP-A, and vice-versa, without having to meet all of the experience requirements again. Currently, our regulations would not allow for that to happen. However, we will be able to address this issue and other issues as the regulations move through the regulatory process to become permanent.

The Committee also discussed issues raised in public comment regarding the need for CSACs in Southwest Virginia and endorsing more credentials from surrounding states.

The Committee addressed the request by the Board of Psychology to adopt the Joint Guidance Document on Assessment Titles and Signatures. The Committee tabled the discussion for a later meeting.

Finally, the Committee wanted to recommend to the board to update its guidance document on affirmative convictions to allow staff to request a state-run background check if an applicant self-reports a criminal conviction. Staff advised that we still need the advice of counsel before moving forward, and will

discuss it, and the need for requiring background checks in general, at a future meeting, where the committee will also discuss the issues of supervision requirements, foreign degrees, and definitions of required courses at future meetings.

The next Regulatory Committee meeting is scheduled for February 8, 2018 at 1:00 p.m.

UNFINISHED BUSINESS:

None.

NEW BUSINESS:

Regulatory/Legislative Report - Ms. Yeatts provide a chart of current regulatory actions as of October 16, 2017 that listed:

- 18VAC 115-20 Regulations Governing the Practice of Professional Counseling acceptance of doctoral practicum/internship hours towards residency requirements (action 4829) -NOIRA Register date 9/4/17 and the comment period ended 10/4/17 –Board need to adopt proposed regulations

A motion was made by Dr. Brendel to accept 18VAC115-20-52 (see agenda pages 59 to 62) as amended it was seconded by Mr. Alvarez and passed unanimously to accept the doctoral practicum/internship hours towards residency requirements.

- 18VAC 115-20 Regulations Governing the Practice of Professional Counseling requirement for CACREP accreditation for educational programs (action 4259) -proposed *at the Secretary's office*
- 18VAC 115-20 Regulations Governing the Practice of Professional Counseling exemption from CE requirement for new licensees and LSATP endorsement (action 4856) –fast-track register date of 11/13/17; effective 12/28/17
- 18VAC 115-30 Regulations Governing the Certification of Substance Abuse Counselors updating and clarifying regulations (Action 4691) – proposed –DPB review in process [stage 8021] (*as of 11/3/17 it is at the Governor's office*)
- 18VAC115-70 Regulations Governing the Registration of Peer Recovery Specialist (under development) – Initial regulations for registration (action 4890) emergency/NOIRA is at the *Secretary's office (stage 8033)* -(*as of 11/3/17 it was approved to go to the Governor's office before December 18, 2017*)
- 18VAC115-80 Regulations Governing the Registration Qualified Mental Health Professionals (under development) – Initial regulations for registration (action 4891) emergency/NOIRA is at the *Secretary's office*

(stage 8034) -(as of 11/3/17 it was approved to go to the Governor's office before December 18, 2017)

Bylaw discussion –sent back to the Regulatory Committee in preparation for staff to provide balanced bylaws for all Behavioral Sciences Boards.

Workforce Survey 2016 Results –Dr Carter provided a handout (see agenda pages 72 to 103) of the Licensed Professional Counselors workforce in Virginia that consist of a 95% response rate. She informed the Board that at this time data for the Licensed Marriage and Family Therapist and Licensed Substance Abuse Treatment Practitioner is not being collected due to staff limitations.

License Portability –The Board endorsement requirements language is similar to CACREP and at this time no action is required. Dr. Doyle sent the discussion to the Regulatory Committee in order to collect additional information to present to the Board.

NEXT MEETING:

The next Quarterly Board Meeting is scheduled for February 9, 2018 at 10:00 a.m.

Closed Session –Consideration of recommended decisions – Ms. Harris moved that the Board of Counseling convene in closed session pursuant to §2.2-3711(A)(27) of the *Code of Virginia* in order to consider agency subordinate recommendations. She further moved that James Rutkowski, Jaime Hoyle, Jennifer Lang, Christy Evans, Charlotte Lenart, and Tracey Arrington-Edmonds attend the closed meeting because their presence in the meeting was deemed necessary and would aid the Board in its consideration of the matters. The motion was seconded and carried unanimously.

RECONVENE: Ms. Harris moved that pursuant to §2.2-3712 of the *Code of Virginia*, the Board of Counseling heard, discussed or considered only those public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as identified in the original motion. The motion was seconded and carried unanimously.

DECISIONS:

Fernando Penaherrera, LPC Applicant

Dr. Penaherrera did not appear.

The agency subordinate recommended that the Board of Counseling deny Dr. Pena Herrera's application for registration of supervision, as a preliminary requirement for licensure by examination.

J. Brian Suchocki, LPC Applicant

Mr. Suchocki did not appear.

The agency subordinate recommended that the Board of Counseling deny Mr. Suchocki's application for registration of supervision, as a preliminary requirement for licensure by examination.

Melinda Fields, LMFT Applicant

Ms. Fields did not appear.

The agency subordinate recommended that the Board of Counseling approve Ms. Fields' application for registration of supervision, as a preliminary requirement for licensure by examination.

April Kennedy, LPC Applicant

Ms. Kennedy did not appear.

The agency subordinate recommended that the Board of Counseling approve Ms. Kennedy's application for registration of supervision, as a preliminary requirement for licensure by examination.

Ms. Engelken moved that the Board of Counseling accept the recommended decisions of the agency subordinate. The motion was seconded by Dr. Yancey and passed unanimously.

ADJOURN:

The meeting adjourned at 1:36 p.m.

Kevin Doyle, Ed.D., LPC, LSATP
Chairperson

Jamie Hoyle, Esq.
Executive Director

**Approval of Board of
Counseling Regulatory Board
Meeting Minutes
November 2, 2017**

**VIRGINIA BOARD OF COUNSELING
REGULATORY COMMITTEE
DRAFT MEETING MINUTES
November 2, 2017**

TIME AND PLACE: A meeting of the Regulatory Committee (Committee) of the Virginia Board of Counseling (Board) convened on Thursday, November 2, 2017, at the Department of Health Professions (DHP), 9960 Mayland Drive, 2nd Floor, Board Room 1, Richmond, Virginia.

PRESIDING OFFICER: Johnston Brendel, Ed.D., LPC, LMFT, Chairperson.

COMMITTEE MEMBERS PRESENT: Danielle Hunt, LPC
Vivian Sanchez-Jones, Citizen Member

COMMITTEE MEMBERS ABSENT: Kevin Doyle, Ed.D., LPC, LSATP
Holly Tracy, LPC, LMFT

STAFF PRESENT: Tracey Arrington-Edmonds, Licensing Specialist
Jaime Hoyle, J.D., Executive Director
Jennifer Lang, Deputy Executive Director
Charlotte Lenart, Licensing Manager
Elaine Yeatts, DHP Senior Policy Analyst

OTHERS PRESENT: Debra Riggs, National Association of Social Workers, Virginia Chapter (NASW-VA)
Kelly Fitzgerald, NASW-VA
Jamie Sacksteder, Virginia Department of Behavioral Health and Developmental Disabilities (DBHDS)
Ashley Harrell, Virginia Department of Medical Assistance Services (DMAS)
Representatives from New Y-CAPP
Representatives from Lynchburg Comprehensive Treatment Center
Representative from Magellan Health
Representative from St. Joseph Villa
Katie Hellebush, Virginia Association of Clinical Counselors
Representative from Virginia Association of Medication Assisted Recovery Programs (VAMARP)
John Salay, Virginia Association of Community Based Providers

ORDERING OF THE AGENDA: Dr. Brendel requested that the public comments be heard before the approval of the minutes. A motion was made to approve the revised agenda. The motion was seconded and passed unanimously.

APPROVAL OF THE MINUTES:

A motion was made by Ms. Hunt to approve the minutes of the July 21, 2017 meeting. The motion was seconded by Ms. Sanchez-Jones and passed unanimously.

PUBLIC COMMENT:

Mr. Salay requested the Committee address the following issues regarding the emergency qualified mental health professional (QMHP) regulations:

- Provide clarification as to the type of services a QMHP-A and QMHP-C can provide, and what experience is required for a QMHP-C to become a QMHP-A.
- Consider DBHDS's list of acceptable human services and related fields degrees for QMHP's or provide a guidance document of acceptable human services related degrees for QMHP's.
- Allow QMHP's that were granted a variance years ago to register as a QMHP through the grandfathering period.

Genevieve King representing Virginia Association of Medication Assisted Recovery Programs (VAMARP) spoke about the shortage of CSACs in Virginia, the issues surrounding CSAS credentialing and requested clarification on the requirements for obtaining the CSAC credential especially through the endorsement process.

OLD BUSINESS:

Petition for Rulemaking – Doctoral Internship and Practicum Hours: Ms. Yeatts informed the committee that the Notice of Intended Regulatory Action (NOIRA) was approved by the Governor, and the public comment period ended. The Board received three comments in favor of the regulation. Now the Regulatory Board needs to recommend that the full Board adopt the proposed regulation:

18VAC115-20-52.B.7.

Supervised practicum and internship hours in a CACREP-accredited doctoral counseling program may be accepted for up to 900 hours of the residency requirement and up to 100 of the required hours of supervision provided the supervisor holds a current, unrestricted license as a professional counselor.

A motion was made by Ms. Hunt to recommend the Board adopt the proposed regulations. The motion was seconded by Ms. Sanchez-Jones and passed unanimously.

Foreign degree discussion: The Committee Members agreed to discuss foreign degree requirements at the next scheduled meeting.

Review definition of required courses: The Committee agreed to discuss the required courses definitions at the next scheduled meeting.

NEW BUSINESS:

Discussion on QMHP

- **Degrees approved as human services and related fields:** The Committee reviewed DBHDS's list of acceptable human services related degrees for QMHP's to incorporate into a Guidance Document. A motion was made by Ms. Hunt to remove Pharmacy and Sociology from the list. The motion was seconded by Ms. Sanchez-Jones and passed unanimously.
- **Variations:** The Committee suggested the creation of a frequently asked questions (FAQs) document to address the DMAS September 1, 2010 QMHP variance requirements in regards to the current proposed QMHP regulations.

Discussion on draft joint guidance document on assessment titles and signatures: The Committee agreed to discuss the issue at the next scheduled meeting.

Affirmative criminal conviction reports: Currently applicants self-report criminal convictions, but it is not always reliable. The Committee discussed its grave concern and the need for requiring a Federal Criminal Background check and asked why the Board has not moved in that direction. Ms. Yeatts explained that additional staff, equipment and budget would be required in order to properly facilitate the duties of processing the criminal records reports. It would also require a Code change. Additionally, the Board would need to decide when to require the report. In the meantime, having staff request a state background check when an applicant self reports a criminal conviction, would be a step in the right direction. However, Board Counsel needs to be consulted and provide feedback before the Committee can make a decision. The Committee tabled this discussion to a future meeting.

CSAC endorsement requirements: Staff proposed that Guidance Document 115-1.9 be amended to specify that the credentials listed in the Guidance Document are only considered equivalent for endorsement purposes if they required an applicant to pass an exam.

A motion was made by Ms. Hunt to accept the proposed change(s) to the Guidance Document:

"For the purpose of meeting the requirement of Section 45, the Board has determined that the following national certifications are deemed substantially equivalent with the verification of passing score on a national examination at the level for which the applicant holds certification."

The motion was seconded by Ms. Sanchez-Jones and passed unanimously.

CSAC-A supervisor requirements: Staff requested clarification on whether the Code of Virginia allows a CSAC to supervise a CSAC-A. The Committee Members agreed that the Code of Virginia allows LSATP, mental health professional licensed by the Department and CSAC to supervise CSAC-A experience toward certification. Individuals only holding a national certification would not qualify.

Supervisor requirements and standards of practice: The Committee agreed to discuss the topics at the next scheduled meeting when more member are in attendance.

Periodic review discussion: A Notice of Intended Periodic Review would need to be adopted before the Board begins a Periodic Review. The Committee can address this issue at a future meeting since the Board initiated its most recent periodic review in 2014. Periodic Reviews should occur every four years.

NEXT SCHEDULED MEETING: February 8, 2018 at 1:00 p.m.

ADJOURNMENT: The meeting adjourned at 2:40 p.m.

Johnston Brendel, Ed.D., LPC, LMFT
Chairperson

Date

Jaime Hoyle, JD
Executive Director

Date

Chairman Report

**National Counselor Licensure Endorsement Process
Recommended Revision – 1/12/18
Submitted by Tennessee**

Any counselor licensed at the highest level of licensure for independent practice available in his or her state may obtain licensure in any other state or territory of the United States if all of the following criteria are met.

1. Licensees may be endorsed for licensure in another state if:
 - a. The individual has been licensed at their state's (or states') highest level of licensure for ten (10) years or more;
 - b. Their license has been active for the past 3 of 5 years ; and
 - c. Their license is in good standing with no prior disciplinary issues

OR...

2. The licensee meets all academic, exam and postgraduate supervised experience standards as adopted by the state counseling licensure board for which they are applying.

If NOT, then...

3. The licensee has engaged in ethical practice with no prior disciplinary actions within the previous 5 years.
4. The licensee successfully passes a criminal background check.
5. The licensee has possessed the highest level of counselor licensure for independent practice for at least the last 3 of 5 years from the date of application for licensure endorsement.
6. The licensee has completed a jurisprudence or equivalent exam if required by the state regulatory body; AND
7. The licensee complies with ONE of the following:
 - a. Has passed the National Clinical Mental Health Counselor Exam (NCMHCE); OR
 - b. Holds the National Certified Counselor (NCC) credential, in good standing, as issued by the National Board for Certified Counselors (NBCC); OR
 - c. Holds a graduate-level degree from a program clinical counseling program accredited by the Council for Accreditation of Counseling & Related Educational Programs (CACREP).



National Counselor Licensure Endorsement Process (NCLEP): Portability Panel

Panelists:

Dave Bergman, NBCC and Affiliates

Joel Miller, AMHCA

Angela McDonald, AASCB

Heather Trepal, ACES

Portability, Endorsement, Reciprocity, Interstate Compacts

- Portability: the quality of being portable
- Endorsement: A process whereby a state issues an unrestricted license to practice to an individual who holds a valid and unrestricted license in another jurisdiction based on certain criteria.
- Reciprocity: A process of granting a license to practice an occupation based on a formal agreement between at least two states to mutually recognize the licensure process as being equivalent.
- Interstate Compacts: Legal agreements between states regarding licensure.
- Barriers to portability: variation in definitions, variation in training and examination, delays in application processing, retroactive requirements

The Portability Task Force agreed upon five (5) key tenets:

A uniform licensure endorsement process *must*:

- I. Significantly increase public access to qualified care;
- II. Establish minimum standards for safe practice;
- III. Reduce administrative burdens for both state regulatory boards and licensees;
- IV. Create consistency in licensure standards across state lines;
and
- V. Ensure the continued development of the profession and protection of the public.



National Counselor Licensure Endorsement Process

Any counselor licensed at the highest level of licensure for independent practice available in his or her state may obtain licensure in any other state or territory of the United States if all of the following criteria are met:

- 1) The licensee has engaged in ethical practice, with no disciplinary sanctions, for at least 5 years from the date of application for licensure endorsement.
- 2) The licensee has possessed the highest level of counselor licensure for independent practice for **at least 3 years** from the date of application for licensure endorsement
- 3) The licensee has completed a jurisprudence or equivalent exam if required by the state regulatory body.
- 4) The licensee complies with **ONE** of the following:
 - a) Meets all academic, exam, and post-graduate supervised experience standards as adopted by the state counseling licensure board.
 - b) Holds the National Certified Counselor (NCC) credential, in good standing, as issued by the National Board for Certified Counselors
 - c) Holds a graduate level degree from a program accredited by the Council for Accreditation of Counseling & Related Educational Programs (CACREP)

COLLABORATING WITH OTHER LICENSING BOARD MEMBERS: SHARED PERSPECTIVES

*Kathy Ybañez-Llorente, PhD, LPC-S
Texas State University*

*AASCB 2018 Conference
San Antonio, Texas*

Differences in titles across the nation

LPC	Alabama	Connecticut	Mississippi	Oklahoma	Texas	Wyoming
	Alaska	DC	Missouri	Oregon	Utah	
	Arizona	Georgia	Nebraska	Pennsylvania	Virginia	
	Arkansas	Louisiana	New Jersey	Puerto Rico	West Virginia	
	Colorado	Michigan	North Carolina	South Carolina	Wisconsin	
LPCC	California	Kentucky	Minnesota	New Mexico	North Dakota	Ohio
LPC/MHSP	Tennessee					
LPCMH	Delaware	South Dakota				
LCPC	Idaho	Kansas	Maryland	Nevada		
	Illinois	Maine	Montana			
LMHC	Florida	Indiana	Massachusetts	Washington		
	Hawaii	Iowa	New York			
LCMHC	New Hampshire		Rhode Island	Vermont		

- Recent efforts to define aspects of the counseling profession have resulted in greater consensus regarding counselor professional identity

(Kaplan, Tardydas, & Gladding, 2014)

- A review of state licensing boards across the nation reveals not only differences in licensure requirements (ACA, 2016), but also in areas such as board composition, responsibilities of board members, contact with licensees, and cooperative relationships with professional associations.
-

- Despite these differences, licensing board members and board administrators/executive directors are at the forefront of the profession, faced with the important task of oversight of the profession.

- How is this accomplished?

- Scant research exists on regulatory boards

(Kress, et al, 2015)

Examination of impact

- Scope of practice issues

(Kassirer, et al, 2013)

- CACREP accreditation as a solution to portability

(Mascari & Webber, 2013)

What are the perceptions of state licensing board members across the nation who work to regulate the counseling profession?



Subjects

- State licensing board members:
 - Executive Director/Administrator/Board Manager/Examiner
 - Professional Member
 - Public/Citizen/Consumer Member

(Eligible participants: current members and those completing board service within the last 2 years)

Respondents

- Represent 41 states (Invited all 50 states, DC & Puerto Rico)
- Executive Directors, Professional Members, and Public Members
 - Professional members (76.15%)
 - Executive Directors (18.36%)
 - Public Member (5.5%)
- Gender: Female (58.5%) Male (39.6%) Not listed (1.8%)
- Caucasian (62%) Asian (7.3%) Hispanic/Latina/o (9.3%) Native Hawaiian/Pacific Islander (6%) Black/African American (6%) American Indian/Alaska Native (4.6%) Other (4.6%)



BARRIERS TO:

APPLICATION PROCESSING

POST-GRADUATE SUPERVISION

PORTABILITY

RECIPROCITY AGREEMENTS

STAKEHOLDER PARTNERSHIPS WITH LICENSING BOARDS





*Current
Legislative
Concerns*

*Trends in
state
licensure
regulation*



How can awareness of shared perspectives across licensing board members lead to a reduction in barriers to licensure, including portability?



American Counseling Association. (2016). Licensure requirements for professional counselors: A state-by-state report. Alexandria, VA: Author.

Kaplan, D. M., Tarvydas, V. M., & Gladding, S. T. (2014). 20/20: A vision for the future of Counseling: The new consensus definition of counseling. *Journal of Counseling & Development, 92*, 366-372.

Kassirer, S. J., Delaney, N. M., Goldstein, L. M., Taylor, M. E., Dobmeier, R. A., & Hernandez, T. J. (2013). Scope of practice impact on employability in New York State: Director and counselor views. *Journal of Mental Health, 35*, 360-376.

Kress, V. E., O'Neill, R. M., Protivnak, J. J., & Stargell, N. A. (2015). Supervisors' suggestions for enhancing counseling regulatory boards' sanctioned supervision practices. *Journal of Mental Health, 37*, 109-123.

Mascari, J. B., & Webber, J. (2013). CACREP accreditation: A solution to license portability and counselor identity problems. *Journal of Counseling & Development, 91*, 15-25.

Thank
you!



Kathy Ybañez-Llorente,
PhD, LPC-S

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Executive Director's Report

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 20100 - Behavioral Science Exec
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account		Amount			
Number	Account Description	Amount	Budget	Under/(Over) Budget	% of Budget
5011110	Employer Retirement Contrib.	14,619.02	28,540.00	13,920.98	51.22%
5011120	Fed Old-Age Ins- Sal St Emp	8,111.59	16,185.00	8,073.41	50.12%
5011130	Fed Old-Age Ins- Wage Earners	234.15	602.00	367.85	38.90%
5011140	Group Insurance	1,494.77	2,772.00	1,277.23	53.92%
5011150	Medical/Hospitalization Ins.	32,926.50	62,388.00	29,461.50	52.78%
5011160	Retiree Medical/Hospitalizatn	1,346.39	2,497.00	1,150.61	53.92%
5011170	Long term Disability Ins	753.06	1,397.00	643.94	53.91%
	Total Employee Benefits	59,485.48	114,381.00	54,895.52	52.01%
5011200	Salaries				
5011230	Salaries, Classified	114,358.70	211,560.00	97,201.30	54.05%
	Total Salaries	114,358.70	211,560.00	97,201.30	54.05%
5011300	Special Payments				
5011380	Deferred Compnstn Match Pmts	65.00	1,440.00	1,375.00	4.51%
	Total Special Payments	65.00	1,440.00	1,375.00	4.51%
5011400	Wages				
5011410	Wages, General	3,060.75	7,835.00	4,774.25	39.07%
	Total Wages	3,060.75	7,835.00	4,774.25	39.07%
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	773.30	-	(773.30)	0.00%
	Total Terminatn Personal Svce Costs	773.30	-	(773.30)	0.00%
5011930	Turnover/Vacancy Benefits				
	Total Personal Services	177,743.23	335,216.00	157,472.77	53.02%
5012000	Contractual Svs				
5012100	Communication Services				
5012160	Telecommunications Svcs (VITA)	703.93	5,000.00	4,296.07	14.08%
5012170	Telecomm. Svcs (Non-State)	292.50	-	(292.50)	0.00%
	Total Communication Services	996.43	5,000.00	4,003.57	19.93%
5012200	Employee Development Services				
5012210	Organization Memberships	125.00	-	(125.00)	0.00%
	Total Employee Development Services	125.00	-	(125.00)	0.00%
5012600	Support Services				
5012630	Clerical Services	600.00	38,615.00	38,015.00	1.55%
	Total Support Services	600.00	38,615.00	38,015.00	1.55%
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	70.09	-	(70.09)	0.00%
	Total Transportation Services	70.09	-	(70.09)	0.00%
	Total Contractual Svs	1,791.52	43,615.00	41,823.48	4.11%
5013000	Supplies And Materials				
5013100	Administrative Supplies				
5013120	Office Supplies	656.29	537.00	(119.29)	122.21%
	Total Administrative Supplies	656.29	537.00	(119.29)	122.21%
5013600	Residential Supplies				
5013630	Food Service Supplies	-	19.00	19.00	0.00%
	Total Residential Supplies	-	19.00	19.00	0.00%
	Total Supplies And Materials	656.29	556.00	(100.29)	118.04%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 20100 - Behavioral Science Exec
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	Amount	Budget	Amount Under/(Over) Budget	% of Budget
5015000	Continuous Charges				
5015300	Operating Lease Payments				
5015390	Building Rentals - Non State	14,847.11	35,138.00	20,290.89	42.25%
	Total Operating Lease Payments	14,847.11	35,138.00	20,290.89	42.25%
	Total Continuous Charges	14,847.11	35,138.00	20,290.89	42.25%
5022000	Equipment				
5022100	Computer Hrdware & Sftware	-			
5022170	Other Computer Equipment	31.20	-	(31.20)	0.00%
	Total Computer Hrdware & Sftware	31.20	-	(31.20)	0.00%
5022200	Educational & Cultural Equip	-			
5022240	Reference Equipment	-	16.00	16.00	0.00%
	Total Educational & Cultural Equip	-	16.00	16.00	0.00%
5022600	Office Equipment				
5022610	Office Appurtenances	-	27.00	27.00	0.00%
5022630	Office Incidentals	-	34.00	34.00	0.00%
5022640	Office Machines	-	3,600.00	3,600.00	0.00%
	Total Office Equipment	-	3,661.00	3,661.00	0.00%
	Total Equipment	31.20	3,677.00	3,645.80	0.85%
	Total Expenditures	195,069.35	418,202.00	223,132.65	46.64%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 20100 - Behavioral Science Exec
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
5011000	Personal Services							
5011100	Employee Benefits							
5011110	Employer Retirement Contrib.	3,317.16	2,277.76	2,277.76	2,248.78	2,248.78	2,248.78	14,619.02
5011120	Fed Old-Age Ins- Sal St Emp	1,835.61	1,253.31	1,253.33	1,253.33	1,262.68	1,253.33	8,111.59
5011130	Fed Old-Age Ins- Wage Earners	169.09	65.06	-	-	-	-	234.15
5011140	Group Insurance	337.17	231.52	231.52	231.52	231.52	231.52	1,494.77
5011150	Medical/Hospitalization Ins.	7,441.50	5,097.00	5,097.00	5,097.00	5,097.00	5,097.00	32,926.50
5011160	Retiree Medical/Hospitalizatn	303.69	208.54	208.54	208.54	208.54	208.54	1,346.39
5011170	Long term Disability Ins	169.86	116.64	116.64	116.64	116.64	116.64	753.06
	Total Employee Benefits	13,574.08	9,249.83	9,184.79	9,155.81	9,165.16	9,155.81	59,485.48
5011200	Salaries							
5011230	Salaries, Classified	25,994.50	17,672.84	17,672.84	17,672.84	17,672.84	17,672.84	114,358.70
	Total Salaries	25,994.50	17,672.84	17,672.84	17,672.84	17,672.84	17,672.84	114,358.70
5011300	Special Payments							
5011380	Deferred Compnstn Match Pmts	15.00	10.00	10.00	10.00	10.00	10.00	65.00
	Total Special Payments	15.00	10.00	10.00	10.00	10.00	10.00	65.00
5011400	Wages							
5011410	Wages, General	2,210.25	850.50	-	-	-	-	3,060.75
	Total Wages	2,210.25	850.50	-	-	-	-	3,060.75
5011600	Terminatn Personal Svce Costs							
5011660	Defined Contribution Match - Hy	154.80	106.30	106.30	135.30	135.30	135.30	773.30
	Total Terminatn Personal Svce Costs	154.80	106.30	106.30	135.30	135.30	135.30	773.30
	Total Personal Services	41,948.63	27,889.47	26,973.93	26,973.95	26,983.30	26,973.95	177,743.23
5012000	Contractual Svcs							
5012100	Communication Services							
5012160	Telecommunications Svcs (VITA)	242.37	252.07	-	-	209.49	-	703.93
5012170	Telecomm. Svcs (Non-State)	67.50	45.00	45.00	45.00	45.00	45.00	292.50
	Total Communication Services	309.87	297.07	45.00	45.00	254.49	45.00	996.43
5012200	Employee Development Services							

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 20100 - Behavioral Science Exec
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
5012210	Organization Memberships	-	-	-	125.00	-	-	125.00
	Total Employee Development Services	-	-	-	125.00	-	-	125.00
5012600	Support Services							
5012630	Clerical Services	-	600.00	-	-	-	-	600.00
	Total Support Services	-	600.00	-	-	-	-	600.00
5012800	Transportation Services							
5012820	Travel, Personal Vehicle	-	-	-	70.09	-	-	70.09
	Total Transportation Services	-	-	-	70.09	-	-	70.09
	Total Contractual Svs	309.87	897.07	45.00	240.09	254.49	45.00	1,791.52
5013000	Supplies And Materials							
5013120	Office Supplies	-	123.45	-	(88.88)	489.13	132.59	656.29
	Total Administrative Supplies	-	123.45	-	(88.88)	489.13	132.59	656.29
	Total Supplies And Materials	-	123.45	-	(88.88)	489.13	132.59	656.29
5015000	Continuous Charges							
5015300	Operating Lease Payments							
5015390	Building Rentals - Non State	2,353.40	2,754.83	2,409.05	2,353.40	2,623.03	2,353.40	14,847.11
	Total Operating Lease Payments	2,353.40	2,754.83	2,409.05	2,353.40	2,623.03	2,353.40	14,847.11
	Total Continuous Charges	2,353.40	2,754.83	2,409.05	2,353.40	2,623.03	2,353.40	14,847.11
5022000	Equipment							
5022100	Computer Hrdware & Sftware							-
5022170	Other Computer Equipment	-	-	31.20	-	-	-	31.20
	Total Computer Hrdware & Sftware	-	-	31.20	-	-	-	31.20
	Total Equipment	-	-	31.20	-	-	-	31.20
	Total Expenditures	44,611.90	31,664.82	29,459.18	29,478.56	30,349.95	29,504.94	195,069.35

109 Counseling

Board Cash Balance as June 30, 2017	\$	826,278
YTD FY18 Revenue		176,235
Less: YTD FY18 Direct and Allocated Expenditures		<u>621,085</u>
Board Cash Balance as December 31, 2017		<u><u>381,429</u></u>

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	Amount	Budget	Amount Under/(Over)	
				Budget	% of Budget
4002400	Fee Revenue				
4002401	Application Fee	117,170.00	123,555.00	6,385.00	94.83%
4002406	License & Renewal Fee	32,360.00	846,410.00	814,050.00	3.82%
4002407	Dup. License Certificate Fee	775.00	825.00	50.00	93.94%
4002409	Board Endorsement - Out	2,105.00	1,740.00	(365.00)	120.98%
4002421	Monetary Penalty & Late Fees	8,935.00	6,500.00	(2,435.00)	137.46%
4002430	Board Changes Fee	14,635.00	25,500.00	10,865.00	57.39%
4002432	Misc. Fee (Bad Check Fee)	35.00	140.00	105.00	25.00%
	Total Fee Revenue	176,015.00	1,004,670.00	828,655.00	17.52%
4003000	Sales of Prop. & Commodities				
4003020	Misc. Sales-Dishonored Payments	220.00	-	(220.00)	0.00%
	Total Sales of Prop. & Commodities	220.00	-	(220.00)	0.00%
	Total Revenue	176,235.00	1,004,670.00	828,435.00	17.54%
5011110	Employer Retirement Contrib.				
5011120	Fed Old-Age Ins- Sal St Emp	4,960.62	9,953.00	4,992.38	49.84%
5011140	Group Insurance	661.29	1,705.00	1,043.71	38.79%
5011150	Medical/Hospitalization Ins.	647.00	20,796.00	20,149.00	3.11%
5011160	Retiree Medical/Hospitalizatn	595.66	1,536.00	940.34	38.78%
5011170	Long term Disability Ins	333.15	859.00	525.85	38.78%
	Total Employee Benefits	12,313.62	52,400.00	40,086.38	23.50%
5011200	Salaries				
5011230	Salaries, Classified	50,588.88	130,099.00	79,510.12	38.88%
5011250	Salaries, Overtime	14,307.39	-	(14,307.39)	0.00%
	Total Salaries	64,896.27	130,099.00	65,202.73	49.88%
5011300	Special Payments				
5011340	Specified Per Diem Payment	1,450.00	3,000.00	1,550.00	48.33%
5011380	Deferred Compnstn Match Pmts	260.00	1,440.00	1,180.00	18.06%
	Total Special Payments	1,710.00	4,440.00	2,730.00	38.51%
5011600	Terminatn Personal Svce Costs				
5011660	Defined Contribution Match - Hy	1,694.03	-	(1,694.03)	0.00%
	Total Terminatn Personal Svce Costs	1,694.03	-	(1,694.03)	0.00%
5011930	Turnover/Vacancy Benefits				
	Total Personal Services	80,613.92	186,939.00	106,325.08	43.12%
5012000	Contractual Svcs				
5012100	Communication Services				
5012110	Express Services	10.68	295.00	284.32	3.62%
5012140	Postal Services	7,994.32	8,232.00	237.68	97.11%
5012150	Printing Services	127.80	120.00	(7.80)	106.50%
5012160	Telecommunications Svcs (VITA)	126.82	900.00	773.18	14.09%
	Total Communication Services	8,259.62	9,547.00	1,287.38	86.52%
5012200	Employee Development Services				
5012210	Organization Memberships	-	500.00	500.00	0.00%
5012260	Personnel Develpmnt Services	-	320.00	320.00	0.00%
	Total Employee Development Services	-	820.00	820.00	0.00%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	Amount	Budget	Amount	
				Under/(Over) Budget	% of Budget
5012300	Health Services				
5012360	X-ray and Laboratory Services	-	140.00	140.00	0.00%
	Total Health Services	-	140.00	140.00	0.00%
5012400	Mgmnt and Informational Svcs	-			
5012420	Fiscal Services	14,575.96	9,280.00	(5,295.96)	157.07%
5012440	Management Services	85.57	134.00	48.43	63.86%
5012460	Public Infrmtnl & Relatn Svcs	68.00	5.00	(63.00)	1360.00%
5012470	Legal Services	195.00	475.00	280.00	41.05%
	Total Mgmnt and Informational Svcs	14,924.53	9,894.00	(5,030.53)	150.84%
5012500	Repair and Maintenance Svcs				
5012560	Mechanical Repair & Maint Srvc	-	34.00	34.00	0.00%
	Total Repair and Maintenance Svcs	-	34.00	34.00	0.00%
5012600	Support Services				
5012630	Clerical Services	54,987.64	110,551.00	55,563.36	49.74%
5012640	Food & Dietary Services	1,693.22	1,075.00	(618.22)	157.51%
5012660	Manual Labor Services	44.89	1,170.00	1,125.11	3.84%
5012670	Production Services	481.17	5,380.00	4,898.83	8.94%
5012680	Skilled Services	8,053.74	16,764.00	8,710.26	48.04%
	Total Support Services	65,260.66	134,940.00	69,679.34	48.36%
5012800	Transportation Services				
5012820	Travel, Personal Vehicle	4,326.20	4,979.00	652.80	86.89%
5012850	Travel, Subsistence & Lodging	1,464.75	1,950.00	485.25	75.12%
5012880	Trvl, Meal Reimb- Not Rprtble	713.00	988.00	275.00	72.17%
	Total Transportation Services	6,503.95	7,917.00	1,413.05	82.15%
	Total Contractual Svcs	94,948.76	163,292.00	68,343.24	58.15%
5013000	Supplies And Materials				
5013100	Administrative Supplies				
5013120	Office Supplies	919.07	597.00	(322.07)	153.95%
	Total Administrative Supplies	919.07	597.00	(322.07)	153.95%
5013600	Residential Supplies				
5013620	Food and Dietary Supplies	23.13	-	(23.13)	0.00%
5013630	Food Service Supplies	-	183.00	183.00	0.00%
	Total Residential Supplies	23.13	183.00	159.87	12.64%
	Total Supplies And Materials	942.20	780.00	(162.20)	120.79%
5015000	Continuous Charges				
5015100	Insurance-Fixed Assets				
5015160	Property Insurance	-	46.00	46.00	0.00%
	Total Insurance-Fixed Assets	-	46.00	46.00	0.00%
5015300	Operating Lease Payments				
5015340	Equipment Rentals	222.87	540.00	317.13	41.27%
5015350	Building Rentals	38.19	-	(38.19)	0.00%
5015360	Land Rentals	-	60.00	60.00	0.00%
5015390	Building Rentals - Non State	5,267.58	12,467.00	7,199.42	42.25%
	Total Operating Lease Payments	5,528.64	13,067.00	7,538.36	42.31%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	Amount	Budget	Amount Under/(Over)		% of Budget
				Budget		
5015500	Insurance-Operations					
5015510	General Liability Insurance	-	170.00	170.00		0.00%
5015540	Surety Bonds	-	11.00	11.00		0.00%
	Total Insurance-Operations	-	181.00	181.00		0.00%
	Total Continuous Charges	5,528.64	13,294.00	7,765.36		41.59%
5022000	Equipment					
5022100	Computer Hrdware & Sftware					
5022170	Other Computer Equipment	336.84	-	(336.84)		0.00%
	Total Computer Hrdware & Sftware	336.84	-	(336.84)		0.00%
5022200	Educational & Cultural Equip					
5022240	Reference Equipment	-	77.00	77.00		0.00%
	Total Educational & Cultural Equip	-	77.00	77.00		0.00%
5022600	Office Equipment					
5022610	Office Appurtenances	-	42.00	42.00		0.00%
	Total Office Equipment	-	42.00	42.00		0.00%
	Total Equipment	336.84	119.00	(217.84)		283.06%
	Total Expenditures	182,370.36	364,424.00	182,053.64		50.04%
	Allocated Expenditures					
20100	Behavioral Science Exec	97,534.68	209,101.00	111,566.33		46.64%
30100	Data Center	115,397.76	202,209.75	86,812.00		57.07%
30200	Human Resources	12,111.46	26,122.48	14,011.01		46.36%
30300	Finance	43,940.80	97,489.36	53,548.56		45.07%
30400	Director's Office	19,528.88	49,291.90	29,763.02		39.62%
30500	Enforcement	97,981.76	154,377.24	56,395.48		63.47%
30600	Administrative Proceedings	18,011.44	39,821.92	21,810.47		45.23%
30700	Impaired Practitioners	130.37	294.83	164.46		44.22%
30800	Attorney General	6,004.02	12,008.05	6,004.02		50.00%
30900	Board of Health Professions	10,479.96	28,001.55	17,521.59		37.43%
31100	Maintenance and Repairs	-	673.47	673.47		0.00%
31300	Emp. Recognition Program	-	420.02	420.02		0.00%
31400	Conference Center	7,639.41	9,390.45	1,751.04		81.35%
31500	Pgm Devlpmnt & Implmentn	9,953.79	27,487.05	17,533.27		36.21%
	Total Allocated Expenditures	438,714.32	856,689.06	417,974.74		51.21%
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (444,849.68)	\$ (216,443.06)	\$ 228,406.62		205.53%

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
4002400	Fee Revenue							
4002401	Application Fee	18,465.00	21,470.00	20,750.00	21,485.00	16,990.00	18,010.00	117,170.00
4002406	License & Renewal Fee	19,555.00	3,120.00	2,470.00	765.00	920.00	5,530.00	32,360.00
4002407	Dup. License Certificate Fee	330.00	200.00	70.00	70.00	55.00	50.00	775.00
4002409	Board Endorsement - Out	605.00	420.00	360.00	240.00	270.00	210.00	2,105.00
4002421	Monetary Penalty & Late Fees	6,720.00	1,130.00	680.00	140.00	145.00	120.00	8,935.00
4002430	Board Changes Fee	2,135.00	3,005.00	2,620.00	2,580.00	2,435.00	1,860.00	14,635.00
4002432	Misc. Fee (Bad Check Fee)	35.00	-	-	-	-	-	35.00
	Total Fee Revenue	47,845.00	29,345.00	26,950.00	25,280.00	20,815.00	25,780.00	176,015.00
4003000	Sales of Prop. & Commodities							
4003020	Misc. Sales-Dishonored Payments	155.00	65.00	-	-	-	-	220.00
	Total Sales of Prop. & Commodities	155.00	65.00	-	-	-	-	220.00
	Total Revenue	48,000.00	29,410.00	26,950.00	25,280.00	20,815.00	25,780.00	176,235.00
5011000	Personal Services							
5011100	Employee Benefits							
5011110	Employer Retirement Contrib.	1,071.90	736.06	736.06	736.06	736.06	1,099.76	5,115.90
5011120	Fed Old-Age Ins- Sal St Emp	1,012.00	707.56	744.84	712.94	775.68	1,007.60	4,960.62
5011140	Group Insurance	140.55	96.52	96.52	96.52	96.52	134.66	661.29
5011150	Medical/Hospitalization Ins.	-	-	-	-	-	647.00	647.00
5011160	Retiree Medical/Hospitalizatn	126.60	86.94	86.94	86.94	86.94	121.30	595.66
5011170	Long term Disability Ins	70.83	48.62	48.62	48.62	48.62	67.84	333.15
	Total Employee Benefits	2,421.88	1,675.70	1,712.98	1,681.08	1,743.82	3,078.16	12,313.62
5011200	Salaries							
5011230	Salaries, Classified	10,837.28	7,367.92	7,367.92	7,367.92	7,367.92	10,279.92	50,588.88
5011250	Salaries, Overtime	2,379.40	1,869.35	2,356.48	1,939.49	2,759.73	3,002.94	14,307.39
	Total Salaries	13,216.68	9,237.27	9,724.40	9,307.41	10,127.65	13,282.86	64,896.27
5011340	Specified Per Diem Payment	100.00	600.00	250.00	-	500.00	-	1,450.00
5011380	Deferred Compnstn Match Pmts	60.00	40.00	40.00	40.00	40.00	40.00	260.00

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
	Total Special Payments	160.00	640.00	290.00	40.00	540.00	40.00	1,710.00
5011600	Terminatn Personal Svce Costs							
5011660	Defined Contribution Match - Hy	375.51	257.88	257.88	257.88	257.88	287.00	1,694.03
	Total Terminatn Personal Svce Costs	375.51	257.88	257.88	257.88	257.88	287.00	1,694.03
	Total Personal Services	16,174.07	11,810.85	11,985.26	11,286.37	12,669.35	16,688.02	80,613.92
5012000	Contractual Svcs							-
5012100	Communication Services							-
5012110	Express Services	-	-	-	-	10.68	-	10.68
5012140	Postal Services	4,237.32	2,242.72	422.39	773.06	207.76	111.07	7,994.32
5012150	Printing Services	-	-	127.80	-	-	-	127.80
5012160	Telecommunications Svcs (VITA)	50.02	52.02	-	-	24.78	-	126.82
	Total Communication Services	4,287.34	2,294.74	550.19	773.06	243.22	111.07	8,259.62
5012400	Mgmnt and Informational Svcs							
5012420	Fiscal Services	5,984.20	7,664.13	556.54	246.37	9.72	115.00	14,575.96
5012440	Management Services	-	79.69	-	(1.40)	-	7.28	85.57
5012460	Public Infrmtnl & Relatn Svcs	-	14.00	10.00	12.00	12.00	20.00	68.00
5012470	Legal Services	-	-	-	195.00	-	-	195.00
	Total Mgmnt and Informational Svcs	5,984.20	7,757.82	566.54	451.97	21.72	142.28	14,924.53
5012600	Support Services							
5012630	Clerical Services	-	8,102.64	9,042.31	11,826.00	8,590.23	17,426.46	54,987.64
5012640	Food & Dietary Services	-	358.97	167.25	751.20	-	415.80	1,693.22
5012660	Manual Labor Services	24.50	10.54	-	-	-	9.85	44.89
5012670	Production Services	143.14	148.38	-	-	68.00	121.65	481.17
5012680	Skilled Services	1,711.72	1,130.16	1,736.85	1,177.19	1,205.16	1,092.66	8,053.74
	Total Support Services	1,879.36	9,750.69	10,946.41	13,754.39	9,863.39	19,066.42	65,260.66
5012800	Transportation Services							
5012820	Travel, Personal Vehicle	933.04	1,231.57	712.08	89.54	1,289.35	70.62	4,326.20
5012850	Travel, Subsistence & Lodging	206.20	618.60	113.10	-	526.85	-	1,464.75
5012880	Trvl, Meal Reimb- Not Rprtble	118.50	247.00	100.50	-	247.00	-	713.00

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
	Total Transportation Services	1,257.74	2,097.17	925.68	89.54	2,063.20	70.62	6,503.95
	Total Contractual Svcs	13,408.64	21,900.42	12,988.82	15,068.96	12,191.53	19,390.39	94,948.76
5013000	Supplies And Materials							
5013100	Administrative Supplies							-
5013120	Office Supplies	-	177.40	457.02	20.78	111.65	152.22	919.07
	Total Administrative Supplies	-	177.40	457.02	20.78	111.65	152.22	919.07
5013600	Residential Supplies							
5013620	Food and Dietary Supplies	23.13	-	-	-	-	-	23.13
	Total Residential Supplies	23.13	-	-	-	-	-	23.13
	Total Supplies And Materials	23.13	177.40	457.02	20.78	111.65	152.22	942.20
5015000	Continuous Charges							
5015300	Operating Lease Payments							
5015340	Equipment Rentals	-	44.08	44.08	44.08	46.55	44.08	222.87
5015350	Building Rentals	-	15.39	-	-	22.80	-	38.19
5015390	Building Rentals - Non State	834.96	977.38	854.70	834.96	930.62	834.96	5,267.58
	Total Operating Lease Payments	834.96	1,036.85	898.78	879.04	999.97	879.04	5,528.64
	Total Continuous Charges	834.96	1,036.85	898.78	879.04	999.97	879.04	5,528.64
5022000	Equipment							
5022170	Other Computer Equipment	-	-	-	-	-	336.84	336.84
	Total Computer Hrdware & Sftware	-	-	-	-	-	336.84	336.84
	Total Equipment	-	-	-	-	-	336.84	336.84
	Total Expenditures	30,440.80	34,925.52	26,329.88	27,255.15	25,972.50	37,446.51	182,370.36
	Allocated Expenditures							
20100	Behavioral Science Exec	22,305.95	15,832.41	14,729.59	14,739.28	15,174.98	14,752.47	97,534.68

Virginia Department of Health Professions
Revenue and Expenditures Summary
Department 10900 - Counseling
For the Period Beginning July 1, 2017 and Ending December 31, 2017

Account Number	Account Description	July	August	September	October	November	December	Total
30100	Data Center	24,508.00	9,277.59	23,409.03	21,009.15	8,109.22	29,084.76	115,397.76
30200	Human Resources	71.94	91.21	75.56	82.03	11,587.85	202.88	12,111.46
30300	Finance	12,378.73	6,447.20	6,462.21	3,407.84	8,273.68	6,971.13	43,940.80
30400	Director's Office	4,002.08	3,177.73	3,006.38	3,023.04	2,948.57	3,371.08	19,528.88
30500	Enforcement	20,773.14	15,876.58	15,039.15	15,515.61	14,707.09	16,070.19	97,981.76
30600	Administrative Proceedings	5,577.84	4,567.57	2,332.88	779.12	-	4,754.03	18,011.44
30700	Impaired Practitioners	28.94	21.56	19.80	19.95	19.51	20.61	130.37
30800	Attorney General	-	-	3,002.01	3,002.01	-	-	6,004.02
30900	Board of Health Professions	2,321.24	1,651.04	1,521.55	1,640.41	1,693.66	1,652.07	10,479.96
31400	Conference Center	9.60	18.22	14,116.05	(1,667.15)	(4,913.37)	76.06	7,639.41
31500	Pgm Devlpmnt & Implmentn	1,811.11	1,594.37	1,508.73	1,525.99	1,759.12	1,754.46	9,953.79
	Total Allocated Expenditures	93,788.56	58,555.49	85,222.93	63,077.30	59,360.30	78,709.74	438,714.32
	Net Revenue in Excess (Shortfall) of Expenditures	\$ (76,229.36)	\$ (64,071.01)	\$ (84,602.81)	\$ (65,052.45)	\$ (64,517.80)	\$ (90,376.25)	\$ (444,849.68)

Deputy Executive Director's Report

BEHAVIORAL SCIENCE BOARDS

COUNSELING, PSYCHOLOGY, AND SOCIAL WORK

Discipline Reports

October 6, 2017 - January 11, 2018

OPEN CASES AT BOARD LEVEL (as of January 11, 2018)

Open Case Stage	Counseling	Psychology	Social Work	BSU Total
Probable Cause Review	26	11	18	55
Scheduled for Informal Conferences	4	0	1	5
Scheduled for Formal Hearings	0	1	2	3
Consent Orders offered	1	0	0	1
Cases with APD for processing (IFC, FH, Consent Order)	12	7	4	23
TOTAL OPEN CASES	43	19	25	87

CASES CLOSED

Closure Category	Counseling	Psychology	Social Work	BSU Total
Closed – no violation	21	18	13	52
Closed – undetermined	3	1	5	9
Closed – violation	1	1	2	4
Credentials/Reinstatement – Denied	3	0	1	4
Credentials/Reinstatement – Approved	8	0	1	9
TOTAL CASES CLOSED	36	20	22	78

AVERAGE CASE PROCESSING TIMES (counted on closed cases)

	Counseling	Psychology	Social Work
Average time for case closures	164 days	176 days	143 days
Avg. time in Enforcement (investigations)	70.3 days	71.3 days	68.6 days
Avg. time in APD (IFC/FH preparation)	94.9 days	50.0 days	81.3 days
Avg. time in Board (includes hearings, reviews, etc).	82.0 days	102 days	63.0 days

BEHAVIORAL SCIENCE BOARDS

COUNSELING, PSYCHOLOGY, AND SOCIAL WORK

Discipline Reports

October 6, 2017 - January 11, 2018

CASES RECEIVED and ACTIVE INVESTIGATIONS

	Counseling	Psychology	Social Work	BSU Total
Cases Received for Board review	34	21	26	81
Open Investigations in Enforcement	42	25	25	92

HEARINGS HELD and CONSENT ORDERS ENTERED

Board Action	Counseling	Psychology	Social Work	BSU Total
Consent Orders Entered	0	2	1	3
Informal Conferences Held Agency Subordinate	0	0	0	0
Informal Conferences Held Special Conference Committee	3	0	0	3
Formal Hearings Held	0	0	1	1
Summary Suspension Hearings Held	0	0	0	0

UPCOMING HEARINGS (2018)

Hearing/Conference Type	Counseling	Psychology	Social Work
Informal Conferences	February 23, 2018 April 13, 2018 June 1, 2018 July 27, 2018	February 27, 2018 June 5, 2018 July 24, 2018	March 2, 2018 June 8, 2018 July 20, 2018
Formal Hearings	May 18, 2018	May 8, 2018	May 11, 2018

Licensing Manager's Report

COUNT OF CURRENT LICENSES *
FISCAL YEAR 2018, QUARTER ENDING DECEMBER 31st, 2017

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*CURRENT LICENSES BY BOARD AND OCCUPATION AS OF THE LAST DAY OF THE QUARTER
** NEW OCCUPATION

Board	Occupation	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018
Audiology/Speech Pathology	Audiologist	491	501	517	519	497	507	517	523	494	503	524	475
	Continuing Education Provider	13	14	14	14	14	15	15	15	15	15	15	15
	School Speech Pathologist	431	475	506	513	475	484	507	514	475	479	493	423
	Speech Pathologist	3,718	3,850	3,907	3,946	3,734	3,796	3,912	4,004	3,871	3,974	4,110	3,857
Total		4,653	4,840	4,944	4,992	4,720	4,802	4,951	5,056	4,855	4,971	5,142	4,770
Counseling	Certified Substance Abuse Counselor	1,679	1,558	1,617	1,679	1,691	1,734	1,662	1,712	1,745	1,784	1,776	1,837
	Licensed Marriage and Family Therapist	832	808	825	845	856	870	836	856	872	885	854	864
	Licensed Professional Counselor	4,123	4,072	4,188	4,333	4,435	4,567	4,512	4,653	4,803	4,932	4,915	5,062
	Marriage & Family Therapist Resident	-	-	-	-	-	-	131	131	140	148	166	205
	Registration of Supervision	-	-	-	-	-	37,125	5,491	5,632	5,747	5,831	6,220	6,660
	Rehabilitation Provider	280	285	286	288	259	266	270	273	250	252	258	260
	Substance Abuse Counseling Assistant	162	152	163	169	179	192	164	174	188	218	203	217
	Substance Abuse Trainee	-	-	-	-	-	-	-	-	-	1,563	1,609	1,654
	Substance Abuse Treatment Practitioner	180	167	170	176	177	179	170	171	176	177	171	185
	Substance Abuse Treatment Residents	-	-	-	-	-	-	1	1	1	1	3	4
Total		7,256	7,042	7,249	7,490	7,597	7,808	13,237	13,603	13,922	15,791	16,175	16,948
Dentistry	Conscious/Moderate Sedation	178	189	198	206	210	212	221	227	233	224	232	233
	Cosmetic Procedure Certification	31	32	33	34	32	36	37	39	36	37	39	38
	Deep Sedation/General Anesthesia	44	51	56	59	63	51	54	58	61	50	54	59
	Dental Assistant II	6	10	10	10	12	11	11	11	15	16	19	19
	Dental Full Time Faculty	11	12	14	14	15	16	12	12	12	13	13	14
	Dental Hygienist	5,293	5,575	5,643	5,687	5,722	5,719	5,815	5,860	5,906	5,789	5,889	5,932
	Dental Hygienist Faculty	0	0	1	1	1	1	1	1	1	2	1	1
	Dental Hygienist Restricted Volunteer	1	1	1	1	1	1	16	0	0	1	1	1
	Dental Hygienist Temporary Permit	0	0	0	0	0	0	0	0	0	0	0	0
	Dental Hygienist Volunteer Registration	1	0	1	0	0	1	0	0	0	1	2	0
	Dental Restricted Volunteer	14	13	14	14	16	20	0	17	17	18	15	16
	Dental Teacher	0	0	0	0	0	0	0	0	0	0	0	0
	Dental Temporary Permit	0	0	0	0	0	0	0	0	0	0	0	0
	Dentist	6,713	7,052	7,152	7,212	7,292	7,147	7,249	7,321	7,404	7,171	7,321	7,377
	Dentist-Volunteer Registration	7	6	9	3	9	7	5	0	2	9	11	0
	Enteral Conscious/Moderate Sedation	150	152	163	175	180	166	174	176	178	169	171	171

NEW LICENSES ISSUED BY QUARTER*
FISCAL YEAR 2016, QUARTER ENDING 12/31/2016

FISCAL YEAR 2018, QUARTER ENDING DECEMBER 31st, 2017

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*Shows the number of initial licenses granted for each licensing board by occupation.
** New Occupation

Board	Occupation											CURRENT	
		Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q1 2018
Audiology/Speech Pathology	Audiologist	5	12	12	0	10	11	7	6	7	10	21	4
	Continuing Education Provider	1	1	0	0	0	1	0	0	0	1	2	
	School Speech Pathologist	115	39	31	6	7	8	23	5	4	3	12	4
	Speech Pathologist	114	117	124	36	54	130	126	58	51	146	131	51
	Total	235	169	167	42	71	150	156	69	62	159	165	61
Counseling	Certified Substance Abuse Counselor	2	33	1	43	0	30	7	33	24	32	57	48
	Licensed Marriage and Family Therapist	2	14	4	16	10	10	11	17	15	10	15	10
	Licensed Professional Counselor	80	108	77	131	103	124	113	128	142	112	119	137
	Marriage and Family Therapist Resident	-	-	-	-	-	-	3	5	10	10	22	10
	Registration of Supervision	-	-	-	-	-	-	91	182	189	131	440	154
	Rehabilitation Provider	2	0	0	1	1	1	2	1	0	0	2	0
	Substance Abuse Counseling Assistant	5	18	12	4	8	10	12	10	11	28	14	12
	Substance Abuse Trainee	-	-	-	-	-	-	-	-	-	61	63	48
	Substance Abuse Treatment Practitioner	0	1	0	5	1	0	12	0	48	0	1	14
	Substance Abuse Treatment Resident	-	-	-	-	-	-	3	51	4	0	1	1
Total	91	174	94	200	123	175	254	427	443	384	734	434	
Dentistry	Conscious/Moderate Sedation	9	4	13	7	2	6	9	6	5	4	8	1
	Cosmetic Procedure Certification	0	1	1	0	1	4	1	1	0	1	1	1
	Deep Sedation/General Anesthesia	2	4	7	3	2	1	3	4	2	1	4	5
	Dental Assistant II	2	4	0	0	1	0	0	0	3	4	3	0
	Dental Full Time Faculty	1	1	2	0	0	1	0	0	0	0	1	0
	Dental Hygienist	23	135	87	38	31	157	86	42	33	153	86	34
	Dental Hygienist Faculty	-	-	-	-	-	-	-	-	-	1	0	0
	Dental Hygienist Restricted Volunteer	0	0	0	0	0	0	2	0	0	0	0	0
	Dental Hygienist Temporary Permit	0	0	0	0	0	0	0	0	0	0	0	0
	Dental Hygienist-Volunteer Registration	5	0	3	0	1	1	0	0	0	3	3	0
	Dental Restricted Volunteer	0	2	1	0	1	3	0	1	0	0	1	0
	Dental Teacher	0	0	0	0	0	0	0	0	0	0	0	0
	Dental Temporary Permit	0	0	0	0	0	0	0	0	0	0	0	0
	Dentist	66	147	115	53	70	150	94	68	81	177	125	51
	Dentist Restricted Permit	0	0	0	0	0	0	0	0	0	0	0	0
	Dentist-Volunteer Registration	12	2	8	13	14	7	9	2	14	14	13	4
	Enteral Conscious/Moderate Sedation	15	0	12	11	4	5	7	2	0	2	2	0
	Mobile Dental Facility	4	1	1	1	0	2	2	1	0	2	0	2
	Oral/Maxillofacial Surgeon Registration	1	5	6	2	3	1	4	3	2	4	7	0



APPLICANT SATISFACTION SURVEY RESULTS APPROVAL RATE

FISCAL YEAR 2018, QUARTER ENDING DECEMBER 31st, 2017

Quarter Breakdown	
Quarter 1	July 1st - September 30th
Quarter 2	October 1st - December 31st
Quarter 3	January 1st - March 31st
Quarter 4	April 1st - June 30th

*Applicant Satisfaction Surveys are sent to all initial applicants. The survey includes seven categories for which applicants rate their satisfaction on a scale from one to four, one and two being degrees of satisfaction, three and four being degrees of dissatisfaction. This report calculates the percentage of total responses falling into the approval range. An "n/a" is used if no response was received for that board during the specified timeframe.
 ** As of FY2018, the questions of the survey were rewritten and a question was added, in order to better provide feedback of services to the boards.

Board	Q3 2015	Q4 2015	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	CURRENT Q2 2018
Audiology/Speech Pathology	100.0%	86.7%	76.7%	100.0%	N/A	100.0%	100.0%	83.3%	33.3%	97.8%	100.0%	90.0%
Counseling	83.9%	80.8%	79.6%	83.3%	100.0%	77.3%	100.0%	81.7%	88.7%	94.0%	92.0%	85.9%
Dentistry	100.0%	93.3%	96.4%	83.3%	N/A	100.0%	100.0%	100.0%	100.0%	100.0%	96.8%	97.4%
Funeral Directing	100.0%	97.0%	88.9%	100.0%	N/A	N/A	100.0%	100.0%	88.9%	100.0%	100.0%	N/A
Long Term Care Administrator	100.0%	96.3%	100.0%	100.0%	N/A	100.0%	100.0%	100.0%	N/A	100.0%	100.0%	100.0%
Medicine	84.8%	89.6%	80.8%	80.6%	89.2%	84.8%	86.2%	85.2%	86.3%	88.3%	88.4%	88.2%
Nurse Aide	88.9%	98.9%	100.0%	98.2%	100.0%	92.9%	90.5%	100.0%	96.8%	88.9%	100.0%	89.5%
Nursing	98.1%	97.2%	92.4%	86.7%	82.5%	73.3%	71.5%	74.3%	76.6%	86.7%	83.2%	89.1%
Optometry	N/A	66.7%	100.0%	N/A	N/A	N/A	100.0%	100.0%	N/A	100.0%	100.0%	N/A
Pharmacy	100.0%	99.5%	96.3%	98.9%	N/A	99.1%	98.2%	100.0%	97.7%	98.4%	97.2%	93.2%
Physical Therapy	100.0%	100.0%	96.9%	89.7%	N/A	100.0%	97.5%	100.0%	100.0%	98.9%	97.3%	100.0%
Psychology	90.0%	84.9%	83.3%	93.2%	100.0%	100.0%	64.3%	91.7%	94.7%	94.9%	98.1%	91.2%
Social Work	90.7%	92.6%	90.7%	94.4%	N/A	100.0%	97.2%	100.0%	91.2%	91.7%	91.1%	92.7%
Veterinary Medicine	N/A	91.7%	100.0%	N/A	N/A	100.0%	100.0%	100.0%	100.0%	100.0%	87.3%	100.0%
AGENCY	95.1%	93.9%	90.6%	88.1%	85.0%	84.6%	80.4%	86.0%	85.2%	90.1%	89.3%	90.0%

Regulatory/Legislative Report

Agenda Item: Regulatory Actions - Chart of Regulatory Actions

Staff Note: Attached is a chart with the status of regulations for the Board as of January 26, 2018

Board		Board of Counseling
Chapter	Action / Stage Information	
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Requirement for CACREP accreditation for educational programs</u> [Action 4259] Proposed - <i>Stage Withdrawn 11/3/2017</i> [Stage 8032]
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Acceptance of doctoral practicum/internship hours towards residency requirements</u> [Action 4829] Proposed - <i>At Secretary's Office for 8 days</i>
[18 VAC 115 - 20]	Regulations Governing the Practice of Professional Counseling	<u>Exemption from CE requirement for new licensees</u> [Action 4856] Fast-Track - <i>Register Date: 11/13/17</i> <i>Effective 12/28/17</i>
[18 VAC 115 - 30]	Regulations Governing the Certification of Substance Abuse Counselors	<u>Updating and clarifying regulations</u> [Action 4691] Proposed - <i>At Secretary's Office for 92 days</i>
[18 VAC 115 - 70]	Regulations Governing the Registration of Peer Recovery Specialists [under development]	<u>Initial regulations for registration</u> [Action 4890] Emergency/NOIRA - <i>Effective: 12/18/17</i> Comment on NOIRA closes: <i>2/7/18</i>
[18 VAC 115 - 80]	Regulations Governing the Registration of Qualified Mental Health Professionals [under development]	<u>Initial regulations for registration</u> [Action 4891] Emergency/NOIRA - <i>Effective: 12/8/17</i> Comment on NOIRA closes: <i>2/7/18</i>

Board of Counseling
Report of the 2018 General Assembly

HB 226 Patients; medically or ethically inappropriate care not required.

Chief patron: Stolle

Summary as introduced:

Medically or ethically inappropriate care not required. Establishes a process whereby a physician may cease to provide health care that has been determined to be medically or ethically inappropriate for a patient.

12/29/17 House: Prefiled and ordered printed; offered 01/10/18 18101693D

12/29/17 House: Referred to Committee on Health, Welfare and Institutions

01/22/18 House: Assigned HWI sub: Subcommittee #3

HB 363 Sexual orientation change efforts; prohibited as training for certain health care providers, etc.

Chief patron: Hope

Summary as introduced:

Sexual orientation change efforts prohibited. Prohibits any health care provider or person who performs counseling as part of his training for any profession licensed by a regulatory board of the Department of Health Professions from engaging in sexual orientation change efforts with any person under 18 years of age. The bill defines "sexual orientation change efforts" as any practice or treatment that seeks to change an individual's sexual orientation or gender identity, including efforts to change behaviors or gender expressions or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same gender. "Sexual orientation change efforts" does not include counseling that provides assistance to a person undergoing gender transition or counseling that provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, and identity exploration and development, including sexual-orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices, as long as such counseling does not seek to change an individual's sexual orientation or gender identity. The bill provides that no state funds shall be expended for the purpose of conducting sexual orientation change efforts, referring a person for sexual orientation change efforts, extending health benefits coverage for sexual orientation change efforts, or awarding a grant or contract to any entity that conducts sexual orientation change efforts or refers individuals for sexual orientation change efforts.

01/05/18 House: Prefiled and ordered printed; offered 01/10/18 18100457D

01/05/18 House: Referred to Committee on Health, Welfare and Institutions

01/25/18 House: Assigned HWI sub: Subcommittee #3

HB 456 Health Professions, Department of; suspension of license, nonpayment of student loans.

Chief patron: Filler-Corn

Summary as introduced:

Department of Health Professions; suspension of license; nonpayment of student loans. Repeals provisions authorizing an obligee to petition for and a circuit court to order the suspension of any state-issued license to engage in a health care profession or occupation when an obligor is delinquent or in default in the payment of a federally guaranteed or state-guaranteed educational loan or work-conditional scholarship.

01/07/18 House: Prefiled and ordered printed; offered 01/10/18 18101926D

01/07/18 House: Referred to Committee on Health, Welfare and Institutions

01/22/18 House: Assigned HWI sub: Subcommittee #1

HB 614 Social work; practice.

Chief patron: Price

Summary as introduced:

Practice of social work. Provides that the Board of Social Work may license baccalaureate social workers, master's social workers, and clinical social workers, as those terms are defined, and may register persons proposing to obtain supervised post-degree experience in the practice of social work.

01/08/18 House: Prefiled and ordered printed; offered 01/10/18 18101583D

01/08/18 House: Referred to Committee on Health, Welfare and Institutions

01/17/18 House: Assigned HWI sub: Subcommittee #1

01/25/18 House: Subcommittee recommends reporting (10-Y 0-N)

HB 697 Professional counselors; requirements for licensure, supervision of applicants.

Chief patron: Miyares

Summary as introduced:

Licensure of professional counselors; requirements for licensure; supervision. Provides that requirements of the Board of Counseling related to supervision of applicants for licensure as a professional counselor shall not require more than 2,400 hours of supervision to be eligible for licensure.

01/09/18 House: Prefiled and ordered printed; offered 01/10/18 18101977D

01/09/18 House: Referred to Committee on Health, Welfare and Institutions

HB 842 Controlled paraphernalia; possession or distribution, hypodermic needles and syringes, naloxone.

Chief patron: LaRock

Summary as introduced:

Possession or distribution of controlled paraphernalia; hypodermic needles and syringes; naloxone. Provides that a person who is authorized by the Department of Behavioral Health and Developmental Services to train individuals on the administration of naloxone for use in opioid overdose reversal and who is acting on behalf of an organization that provides services to individuals at risk of experiencing an

opioid overdose or training in the administration of naloxone for overdose reversal and that has obtained a controlled substances registration from the Board of Pharmacy may dispense or distribute hypodermic needles and syringes in conjunction with such dispensing of naloxone and that a person to whom naloxone has been distributed by such individual may possess hypodermic needles and syringes in conjunction with such possession of naloxone.

01/09/18 House: Referred to Committee on Health, Welfare and Institutions

01/17/18 House: Assigned HWI sub: Subcommittee #2

01/23/18 House: Subcommittee recommends reporting with amendments (10-Y 0-N)

01/25/18 House: Reported from Health, Welfare and Institutions with amendments (22-Y 0-N)

HB 880 Professional and occupational regulatory analyst; establishes position within DLS.

Chief patron: Webert

Summary as introduced:

Professions and occupations; regulatory boards. Establishes the position of professional and occupational regulatory analyst within the Division of Legislative Services to assist the Joint Commission on Administrative Rules in (i) exerting its best efforts to evaluate at least three professions or occupations in each year and (ii) to the extent feasible, reviewing legislation establishing or modifying an occupational regulation to determine whether the legislation uses the least restrictive regulation necessary to protect or preserve the public health, safety, and welfare. The evaluation shall include recommendations for changes to occupational regulations to encourage use of the least restrictive regulation necessary.

01/09/18 House: Prefiled and ordered printed; offered 01/10/18 18104251D

01/09/18 House: Referred to Committee on Rules

HB 1071 Health regulatory boards; electronic notice of license renewal.

Chief patron: Heretick

Summary as introduced:

Health regulatory boards; license renewal; electronic notice. Provides that the Board of Funeral Directors and Embalmers, the Board of Medicine, and the Board of Nursing may send notices for license renewal electronically.

01/10/18 House: Prefiled and ordered printed; offered 01/10/18 18101584D

01/10/18 House: Referred to Committee on Health, Welfare and Institutions

01/25/18 House: Reported from Health, Welfare and Institutions with amendment (22-Y 0-N)

HB 1114 Professional and occupational regulation; authority to suspend or revoke licenses, certificates.

Chief patron: VanValkenburg

Summary as introduced:

Professional and occupational regulation; authority to suspend or revoke licenses, certificates, registrations, or permits; default or delinquency of education loan or scholarship. Provides that the Department of Professional and Occupational Regulation, the Department of Health Professions, the

Board of Accountancy, and the Board of Education shall not be authorized to suspend or revoke the license, certificate, registration, permit, or authority it has issued any person who is in default or delinquent in the payment of a federal-guaranteed or state-guaranteed educational loan or work-conditional scholarship solely on the basis of such default or delinquency.

01/10/18 House: Referred to Committee on General Laws

01/19/18 House: Assigned GL sub: Subcommittee #1

01/25/18 House: Subcommittee recommends reporting (7-Y 1-N)

HB 1383 Marriage and family therapy; clarifies definition, adds appraisal.

Chief patron: Rodman

Summary as introduced:

Marriage and family therapy; appraisal. Provides that "marriage and family therapy" means the appraisal and treatment of cognitive, affective, or behavioral mental and emotional disorders within the context of marriage and family systems through the application of therapeutic and family systems theories and techniques and delivery of services to individuals, couples, and families, singularly or in groups, for the purpose of treating such disorders. Currently, "marriage and family therapy" means the assessment and treatment of such disorders.

01/12/18 House: Referred to Committee on Health, Welfare and Institutions

01/19/18 House: Assigned HWI sub: Subcommittee #2

HB 1510 Professions & occupations; recognizing licenses/certificates issued by Commonwealth of Puerto Rico.

Chief patron: Simon

Summary as introduced:

Professions and occupations; reciprocity. Directs the Department of Professional and Occupational Regulation and the Department of Health Professions to promulgate regulations recognizing licenses or certificates issued by the Commonwealth of Puerto Rico as full fulfillment of qualifications for licensure or certification in the Commonwealth. The provisions of the bill expire on July 1, 2021.

01/18/18 House: Referred to Committee on General Laws

01/22/18 House: Assigned GL sub: Subcommittee #1

SB 245 Conversion therapy; prohibited by certain health care providers.

Chief patron: Surovell

Summary as introduced:

Conversion therapy prohibited. Prohibits any health care provider or person who performs counseling as part of his training for any profession licensed by a regulatory board of the Department of Health Professions from engaging in conversion therapy with any person under 18 years of age. The bill defines "conversion therapy" as any practice or treatment that seeks to change an individual's sexual orientation or gender identity, including efforts to change behaviors or gender expressions or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same gender. "Conversion therapy"

does not include counseling that provides assistance to a person undergoing gender transition, or counseling that provides acceptance, support, and understanding of a person or facilitates a person's coping, social support, and identity exploration and development, including sexual-orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices, as long as such counseling does not seek to change an individual's sexual orientation or gender identity. The bill provides that no state funds shall be expended for the purpose of conducting conversion therapy, referring a person for conversion therapy, extending health benefits coverage for conversion therapy, or awarding a grant or contract to any entity that conducts conversion therapy or refers individuals for conversion therapy.

01/05/18 Senate: Prefiled and ordered printed; offered 01/10/18 18101218D

01/05/18 Senate: Referred to Committee on Education and Health

01/18/18 Senate: Passed by indefinitely in Education and Health (8-Y 7-N)

SB 258 Subpoenas; issuance by Director of Department of Health Professions or his designee.

Chief patron: Petersen

Summary as introduced:

Department of Health Professions; subpoenas. Provides that a subpoena issued by the Director of the Department of Health Professions or his designee may be delivered by (i) any person authorized to serve process under § 8.01-293, (ii) investigative personnel appointed by the Director, (iii) registered or certified mail or by equivalent commercial parcel delivery service, or (iv) email or facsimile if requested to do so by the recipient. The bill provides that upon failure of any person to comply with a subpoena, the Director may request that the Attorney General or the attorney for the Commonwealth for the jurisdiction in which the recipient of the subpoena resides, is found, or transacts business seek enforcement of the subpoena.

01/22/18 Senate: Committee amendments agreed to

01/22/18 Senate: Engrossed by Senate as amended SB258E

01/22/18 Senate: Printed as engrossed 18104375D-E

01/23/18 Senate: Read third time and passed Senate (39-Y 0-N)

SB 417 Community health worker; VDH to approve one or more entities to certify workers in the Commonwealth.

Chief patron: Barker

Summary as introduced:

Community health workers; certification. Requires the Department of Health to approve one or more entities to certify community health workers in the Commonwealth and prohibits a person from using or assuming the title of community health worker unless he is certified by an entity approved by the Department.

01/16/18 Senate: Impact statement from VDH (SB417)

01/22/18 Senate: Assigned Education sub: Health

01/25/18 Senate: Reported from Education and Health with substitute (14-Y 0-N)

01/25/18 Senate: Committee substitute printed 18105859D-S1

01/26/18 Senate: Constitutional reading dispensed (35-Y 0-N)

SB 597 Marijuana; possession or distribution for medical purposes.

Chief patron: Vogel

Summary as introduced:

Possession or distribution of marijuana for medical purposes; affirmative defense for treatment of certain conditions. Provides an affirmative defense to prosecution for possession of marijuana if a person has a valid written certification issued by a practitioner for cannabidiol oil or THC-A oil for treatment of, or to alleviate the symptoms of, cancer, glaucoma, human immunodeficiency virus, acquired immune deficiency syndrome, hepatitis C, amyotrophic lateral sclerosis, Crohn's disease, Alzheimer's disease, nail patella, cachexia or wasting syndrome, multiple sclerosis, or complex regional pain syndrome. Under current law, only the treatment of intractable epilepsy is covered by the affirmative defense.

01/09/18 Senate: Prefiled and ordered printed; offered 01/10/18 18103328D

01/09/18 Senate: Referred to Committee for Courts of Justice

SB 762 BHDS, Board of; definition of "licensed mental health professional.

Chief patron: Barker

Summary as introduced:

Board of Behavioral Health and Developmental Services; definition of "licensed mental health professional." Directs the State Board of Behavioral Health and Developmental Services (State Board) to amend regulations governing licensure of providers of behavioral health services to include (i) behavior analysts and (ii) assistant behavior analysts in the definition of "licensed mental health professional." The bill directs the State Board to promulgate regulations to implement the provisions of the act to be effective within 280 days of its enactment.

01/10/18 Senate: Prefiled and ordered printed; offered 01/10/18 18101554D

01/10/18 Senate: Referred to Committee on Education and Health

01/23/18 Senate: Impact statement from DPB (SB762)

SB 795 Cannabidiol oil and THC-A oil; certification for use, dispensing.

Chief patron: Dunnivant

Summary as introduced:

CBD oil and THC-A oil; certification for use; dispensing. Provides that a practitioner may issue a written certification for the use of cannabidiol oil or THC-A oil for the treatment or to alleviate the symptoms of any diagnosed condition or disease determined by the practitioner to benefit from such use. Under current law, a practitioner may only issue such certification for the treatment or to alleviate the symptoms of intractable epilepsy. The bill also reduces the minimum amount of cannabidiol or tetrahydrocannabinol acid per milliliter for a dilution of the Cannabis plant to fall under the definition of CBD oil or THC-A oil, respectively.

01/10/18 Senate: Presented and ordered printed 18103225D

01/10/18 Senate: Referred to Committee on Education and Health

01/22/18 Senate: Assigned Education sub: Health Professions

Emergency Regulations Governing the Registration of Qualified Mental Health Professionals

Commonwealth of Virginia



Emergency REGULATIONS

GOVERNING THE REGISTRATION OF QUALIFIED MENTAL HEALTH PROFESSIONALS

VIRGINIA BOARD OF COUNSELING

Title of Regulations: 18 VAC 115-80-10 et seq.

**Statutory Authority: §§ 54.1-2400 and Chapter 35 of Title 54.1
of the *Code of Virginia***

Effective Date: December 18, 2017

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Part I. General Provisions.

18VAC115-80-10. Definitions.

"Accredited" means a school that is listed as accredited on the United States Department of Education College Accreditation database found on the United States Department of Education website.

"Applicant" means a person applying for registration as a qualified mental health professional.

"Board" means the Virginia Board of Counseling.

"Collaborative mental health services" means those rehabilitative supportive services that are provided by a qualified mental health professional, as set forth in a service plan under the direction of and in collaboration with either a mental health professional licensed in Virginia or a person under supervision, that has been approved by the Boards of Counseling, Psychology, or Social Work as a pre-requisite for licensure.

"DBHDS" means the Virginia Department of Behavioral Health and Developmental Services.

"Face-to-face" means the physical presence of the individuals involved in the supervisory relationship or the use of technology that provides real-time, visual and audio contact among the individuals involved.

"Mental health professional" means a person who by education and experience is professionally qualified and licensed in Virginia to provide counseling interventions designed to facilitate an individual's achievement of human development goals and remediate mental, emotional, or behavioral disorders and associated distresses which interfere with mental health and development.

"Qualified mental health professional or QMHP" means a person who by education and experience is professionally qualified and registered by the board to provide collaborative mental health services for adults or children. A QMHP shall not engage in independent or autonomous practice. A QMHP shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

"Qualified Mental Health Professional-Adult or QMHP-A" means a registered QMHP who is trained and experienced in providing mental health services to adults who have a mental illness. A QMHP-A shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

"Qualified Mental Health Professional-Child or QMHP-C" means a registered QMHP who is trained and experienced in providing mental health services to children or adolescents who have a mental illness. A QMHP-C shall provide such services as an employee or independent contractor of the DBHDS or a provider licensed by the DBHDS.

"Registrant" means a QMHP registered with the board.

18VAC115-80-20. Fees required by the board.

A. The board has established the following fees applicable to registration of qualified mental health professionals:

Registration	\$50
Renewal of registration	\$30
Late renewal	\$20
Reinstatement of a lapsed registration	\$75
Duplicate certificate of registration	\$10
Returned check	\$35
Reinstatement following revocation or suspension	\$500

B. Unless otherwise provided, fees established by the board shall not be refundable.

18VAC115-80-30. Current name and address.

Each registrant shall furnish the board his current name and address of record. Any change of name or address of record or public address, if different from the address of record, shall be furnished to the board within 60 days of such change. It shall be the duty and responsibility of each registrant to inform the board of his current address.

Part II. Requirements for Registration.

18VAC115-80-40. Requirements for registration as a QMHP-A.

A. An applicant for registration shall submit a completed application on forms provided by the board and any applicable fee as prescribed in 18VAC115-80-20.

B. An applicant for registration as a QMHP-A shall provide evidence of either:

1. A master's degree in psychology, social work, counseling, substance abuse, or marriage and family therapy from an accredited college or university with an internship or practicum of at least 500 hours of experience with persons who have mental illness;
2. A master's or bachelor's degree in human services or a related field from an accredited college with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section;
3. A bachelor's degree from an accredited college in an unrelated field that includes at least 15 semester credits or 22 quarter hours in a human services field and with no less than 3,000 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section;

4. A registered nurse licensed in Virginia with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section; or

5. A licensed occupational therapist with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section.

C. Experience required for registration.

1. In order to be registered as a QMHP-A, an applicant who does not have a master's degree as set forth in subsection B 1 of this section shall provide documentation of experience in providing direct services to individuals as part of a population of adults with mental illness in a setting where mental health treatment, practice, observation or diagnosis occurs. The services provided shall be appropriate to the practice of a QMHP-A and under the supervision of a licensed mental health professional or a person under supervision that has been approved by the Boards of Counseling, Psychology, or Social Work as a pre-requisite for licensure.

2. Supervision shall consist of face-to-face training in the services of a QMHP-A until the supervisor determines competency in the provision of such services, after which supervision may be indirect in which the supervisor is either on-site or immediately available for consultation with the person being trained.

3. Hours obtained in a bachelor's or master's level internship or practicum in a human services field may be counted towards completion of the required hours of experience.

4. A person receiving supervised training in order to qualify as a QMHP-A may register with the board.

18VAC115-80-50. Requirements for registration as a QMHP-C.

A. An applicant for registration shall submit a completed application for forms provided by the board and any applicable fee as prescribed in 18VAC115-80-20.

B. An applicant for registration as a QMHP-C shall provide evidence of either:

1. A master's degree in psychology, social work, counseling, substance abuse, or marriage and family therapy from an accredited college or university with an internship or practicum of at least 500 hours of experience with persons who have mental illness;

2. A master's or bachelor's degree in a human services field or in special education from an accredited college with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section;

3. A registered nurse licensed in Virginia with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section; or

4. A licensed occupational therapist with no less than 1,500 hours of supervised experience to be obtained within a five-year period immediately preceding application for registration and as specified in subsection C of this section.

C. Experience required for registration.

1. In order to be registered as a QMHP-C, an applicant who does not have a master's degree as set forth in subsection B 1 of this section shall provide documentation of 1,500 hours of experience in providing direct services to individuals as part of a population of children or adolescents with mental illness in a setting where mental health treatment, practice, observation or diagnosis occurs. The services provided shall be appropriate to the practice of a QMHP-C and under the supervision of a licensed mental health professional or a person under supervision that has been approved by the Boards of Counseling, Psychology, or Social Work as a pre-requisite for licensure.

2. Supervision shall consist of face-to-face training in the services of a QMHP-C until the supervisor determines competency in the provision of such services, after which supervision may be indirect in which the supervisor is either on-site or immediately available for consultation with the person being trained.

3. Hours obtained in a bachelor's or master's level internship or practicum in a human services field may be counted towards completion of the required hours of experience.

4. A person receiving supervised training in order to qualify as a QMHP-C may register with the board.

18VAC115-80-60. Registration of QMHPs with prior experience.

Until December 31, 2018, persons who have been employed as QMHPs prior to December 31, 2017, may be registered with the board by submission of a completed application, payment of the application fee, and submission of an attestation from an employer that they met the qualifications for a QMHP-A or a QMHP-C during the time of employment. Such persons may continue to renew their registration without meeting current requirements for registration provided they do not allow their registration to lapse or have board action to revoke or suspend, in which case they shall meet the requirements for reinstatement.

Part III. Renewal of registration.

18VAC115-80-70. Annual renewal of registration.

All registrants shall renew their registration on or before June 30 of each year. Along with the renewal form, the registrant shall submit the renewal fee as prescribed in 18VAC115-80-20.

18VAC115-80-80. Continued competency requirements for renewal of registration.

A. Qualified mental health professionals shall be required to have completed a minimum of eight contact hours of continuing education for each annual registration renewal. A minimum of one of these hours shall be in a course that emphasizes ethics.

B. Qualified mental health professionals shall complete continuing competency activities that focus on increasing knowledge or skills in areas directly related to the services provided by a QMHP.

C. The following organizations, associations, or institutions are approved by the board to provide continuing education provided the hours are directly related to the provision of mental health services:

1. Federal, state, or local governmental agencies, public school systems, or licensed health facilities; and
2. Entities approved for continuing education by a health regulatory board within the Department of Health Professions.

D. Attestation of completion of continuing education is not required for the first renewal following initial registration in Virginia.

E. The board may grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the registrant prior to the renewal date. Such extension shall not relieve the registrant of the continuing education requirement.

F. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the registrant such as temporary disability, mandatory military service, or officially declared disasters upon written request from the registrant prior to the renewal date.

G. All registrants shall maintain original documentation of official transcripts showing credit hours earned or certificates of participation for a period of three years following renewal.

H. The board may conduct an audit of registrants to verify compliance with the requirement for a renewal period. Upon request, a registrant shall provide documentation as follows:

1. Official transcripts showing credit hours earned; or
2. Certificates of participation.

I. Continuing education hours required by a disciplinary order shall not be used to satisfy renewal requirements.

Part IV. Standards of practice; disciplinary action; reinstatement.

18VAC115-80-90. Standards of practice.

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board.

B. Persons registered by the board shall:

1. Practice in a manner that is in the best interest of the public and does not endanger the public health, safety, or welfare.
2. Practice only within the competency area for which they are qualified by training or experience and shall not provide clinical mental health services for which a license is required pursuant to Code of Virginia, Title 54.1, Chapters 35, 36, and 37.
3. Report to the board known or suspected violations of the laws and regulations governing the practice of qualified mental health professionals.
4. Neither accept nor give commissions, rebates, or other forms of remuneration for the referral of clients for professional services and make appropriate consultations and referrals based on the interest of patients or clients.
5. Stay abreast of new developments, concepts, and practices which are necessary to providing appropriate services.

C. In regard to confidentiality and client records, persons registered by the board shall:

1. Not willfully or negligently breach the confidentiality between a practitioner and a client. A breach of confidentiality that is required or permitted by applicable law or beyond the control of the practitioner shall not be considered negligent or willful.
2. Disclose client records to others only in accordance with applicable law.
3. Maintain client records securely, inform all employees of the requirements of confidentiality and provide for the destruction of records that are no longer useful in a manner that ensures client confidentiality.
4. Maintain timely, accurate, legible, and complete written or electronic records for each client, to include dates of service and identifying information to substantiate treatment plan, client progress, and termination.

D. In regard to dual relationships, persons registered by the board shall:

1. Not engage in dual relationships with clients or former clients that are harmful to the client's well-being, or which would impair the practitioner's objectivity and professional judgment, or increase the risk of client exploitation. This prohibition includes such activities as providing services to close friends, former sexual partners, employees, or relatives; or engaging in business relationships with clients.
2. Not engage in sexual intimacies or romantic relationships with current clients. For at least five years after cessation or termination of professional services, practitioners shall not engage in sexual intimacies or romantic relationships with a client or those included in collateral therapeutic services. Because sexual or romantic relationships are potentially exploitative, the practitioner shall bear the burden of demonstrating that there has been no exploitation. A client's consent to, initiation of or participation in sexual behavior or

involvement with a practitioner does not change the nature of the conduct nor lift the regulatory prohibition.

3. Recognize conflicts of interest and inform all parties of obligations, responsibilities, and loyalties to third parties.

E. Upon learning of evidence that indicates a reasonable probability that another mental health service provider, as defined in § 54.1-2400.1 of the Code of Virginia is or may be guilty of a violation of standards of conduct as defined in statute or regulation, persons registered by the board shall advise their clients of their right to report such misconduct to the Department of Health Professions in accordance with § 54.1-2400.4 of the Code of Virginia.

18VAC115-80-100. Grounds for revocation, suspension, restriction, or denial of registration.

In accordance with § 54.1-2400(7) of the Code of Virginia, the board may revoke, suspend, restrict, or decline to issue or renew a registration based upon the following conduct:

1. Conviction of a felony, or of a misdemeanor involving moral turpitude, or violation of or aid to another in violating any provision of Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia, any other statute applicable to the practice of qualified mental health professionals, or any provision of this chapter;
2. Procuring or maintaining a registration, including submission of an application or applicable board forms, by fraud or misrepresentation;
3. Conducting one's practice in such a manner so as to make it a danger to the health and welfare of one's clients or to the public; or if one is unable to practice with reasonable skill and safety to clients by reason of illness, abusive use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of any mental or physical condition;
4. Violating or abetting another person in the violation of any provision of any statute applicable to the practice of qualified mental health professionals, or any regulation in this chapter;
5. Performance of functions outside the board-registered area of competency;
6. Performance of an act likely to deceive, defraud, or harm the public;
7. Intentional or negligent conduct that causes or is likely to cause injury to a client;
8. Action taken against a health or mental health license, certification, registration, or application in Virginia or other jurisdiction;
9. Failure to cooperate with an employee of the Department of Health Professions in the conduct of an investigation; or

10. Failure to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia, or elder abuse or neglect as required in § 63.2-1606 of the Code of Virginia.

18VAC115-80-110. Late renewal and reinstatement.

A. A person whose registration has expired may renew it within one year after its expiration date by paying the late renewal fee and the registration fee as prescribed in 18VAC115-80-20 for the year in which the registration was not renewed and by providing documentation of completion of continuing education as prescribed in 18VAC115-80-80.

B. A person who fails to renew registration after one year or more shall:

1. Apply for reinstatement;
2. Pay the reinstatement fee for a lapsed registration;
3. Submit evidence of completion of 20 hours of continuing education consistent with requirements of 18VAC115-80-80.

C. A person whose registration has been suspended or who has been denied reinstatement by board order, having met the terms of the order, may submit a new application and fee for reinstatement of registration as prescribed in 18VAC115-80-20. Any person whose registration has been revoked by the board may, three years subsequent to such board action, submit a new application and fee for reinstatement of registration as prescribed in [18VAC115-80-20](#). The board in its discretion may, after an administrative proceeding, grant the reinstatement sought in this subsection.

**Guidance Document 115-8
Approved Degrees in Human
Services and Related Fields for
QMHP Registration**

Board of Counseling

Approved Degrees in Human Services and Related Fields for QMHP Registration

Regulations for the Virginia Board of Counseling provide in 18VAC115-80-40 that a person may qualify as a QMHP-A with a “master’s or bachelor’s degree in human services or a related field from an accredited college.” Section 18VAC115-80-50 provides that “a person may qualify as a QMHP-C with a “master’s or bachelor’s degree in human services or in special education from an accredited college.”

The Board recognizes the following degrees as “human services or related fields:”

Art Therapy
Behavioral Sciences
Child Development
Child and Family Studies/Services
Cognitive Sciences
Community Mental Health
Counseling (Mental health, Vocational, Pastoral, etc.)
Counselor Education
Early Childhood Development
Education (with a focus in psychology and/or special education)
Educational Psychology
Family Development/Relations
Gerontology
Health and Human Services
Human Development
Human Services
Marriage and Family Therapy
Music Therapy
Nursing
Psychiatric Rehabilitation
Psychology
Rehabilitation Counseling
School Counseling
Social Work
Special Education
Therapeutic Recreation
Vocational Rehabilitation

The Board may consider other degrees in human services or in fields related to the provision of mental health services.

Emergency Regulations Governing the Registration of Peer Recovery Specialists

Commonwealth of Virginia



EMERGENCY REGULATIONS

GOVERNING THE REGISTRATION OF PEER RECOVERY SPECIALISTS

VIRGINIA BOARD OF COUNSELING

Title of Regulations: 18 VAC 115-70-10 et seq.

**Statutory Authority: §§ 54.1-2400 and Chapter 35 of Title 54.1
of the *Code of Virginia***

Effective Date: December 18, 2017

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Part I General Provisions

18VAC115-70-10. Definitions.

"Applicant" means a person applying for registration as a peer recovery specialist.

"Board" means the Virginia Board of Counseling.

"DBHDS" means the Virginia Department of Behavioral Health and Developmental Services.

"Mental health professional" means a person who by education and experience is professionally qualified and licensed in Virginia to provide counseling interventions designed to facilitate an individual's achievement of human development goals and remediate mental, emotional, or behavioral disorders and associated distresses which interfere with mental health and development.

"Peer recovery specialist" means a person who by education and experience is professionally qualified in accordance with 12VAC35-250 to provide collaborative services to assist individuals in achieving sustained recovery from the effects of mental illness, addiction, or both.

"Registered peer recovery specialist" or "registrant" means a person who by education and experience is professionally qualified in accordance with 12VAC35-250 and registered by the board to provide collaborative services to assist individuals in achieving sustained recovery from the effects of mental illness, addiction, or both. A registered peer recovery specialist shall provide such services as an employee or independent contractor of DBHDS, a provider licensed by the DBHDS, a practitioner licensed by or holding a permit issued from the Department of Health Professions, or a facility licensed by the Department of Health.

18VAC115-70-20. Fees required by the board.

A. The board has established the following fees applicable to the registration of peer recovery specialists:

Registration	\$30
Renewal of registration	\$30
Late renewal	\$20
Reinstatement of a lapsed registration	\$60
Duplicate certificate of registration	\$10
Returned check	\$35
Reinstatement following revocation or suspension	\$500

B. Unless otherwise provided, fees established by the board shall not be refundable.

18VAC115-70-30. Current name and address.

Each registrant shall furnish the board his current name and address of record. Any change of name or address of record or public address, if different from the address of record, shall be

furnished to the board within 60 days of such change. It shall be the duty and responsibility of each registrant to inform the board of his current address.

Part II

Requirements for registration and renewal

18VAC115-70-40. Requirements for registration as a peer recovery specialist.

A. An applicant for registration shall submit a completed application on forms provided by the board and any applicable fee as prescribed in 18VAC115-70-20.

B. An applicant for registration as a peer recovery specialist shall provide evidence of meeting all requirements for peer recovery specialists set by DBHDS in 12VAC35-250-30.

18VAC115-70-50. Annual renewal of registration.

All registrants shall renew their registration on or before June 30 of each year. Along with the renewal form, the registrant shall submit the renewal fee as prescribed in 18VAC115-70-20.

18VAC115-70-60. Continued competency requirements for renewal of peer recovery specialist registration.

A. Registered peer recovery specialists shall be required to have completed a minimum of eight contact hours of continuing education for each annual registration renewal. A minimum of one of these hours shall be in courses that emphasize ethics.

Registered peer recovery specialists shall complete continuing competency activities that focus on increasing knowledge or skills in one or more of the following areas:

- a. Current body of mental health/substance abuse knowledge;
- b. Promoting services, supports, and strategies for the recovery process;
- c. Crisis intervention;
- d. Values for role of peer recovery specialist;
- e. Basic principles related to health and wellness;
- f. Stage appropriate pathways in recovery support;
- g. Ethics and boundaries;
- h. Cultural sensitivity and practice;
- i. Trauma and impact on recovery;
- j. Community resources; or

k. Delivering peer services within agencies and organizations.

B. The following organizations, associations, or institutions are approved by the board to provide continuing education:

1. Federal, state, or local governmental agencies, public school systems, or licensed health facilities.
2. The American Association for Marriage and Family Therapy and its state affiliates.
3. The American Association of State Counseling Boards.
4. The American Counseling Association and its state and local affiliates.
5. The American Psychological Association and its state affiliates.
6. The Commission on Rehabilitation Counselor Certification.
7. NAADAC, the Association for Addiction Professionals and its state and local affiliates.
8. National Association of Social Workers.
9. National Board for Certified Counselors.
10. A national behavioral health organization or certification body recognized by the board.
11. Individuals or organizations that have been approved as continuing competency sponsors by the American Association of State Counseling Boards or a counseling board in another state.
12. An agency or organization approved by DBHDS.

C. Attestation of completion of continuing education is not required for the first renewal following initial registration in Virginia.

D. The board may grant an extension for good cause of up to one year for the completion of continuing education requirements upon written request from the registrant prior to the renewal date. Such extension shall not relieve the registrant of the continuing education requirement.

E. The board may grant an exemption for all or part of the continuing education requirements due to circumstances beyond the control of the registrant such as temporary disability, mandatory military service, or officially declared disasters upon written request from the registrant prior to the renewal date.

F. All registrants shall maintain original documentation of official transcripts showing credit hours earned or certificates of participation for a period of three years following renewal.

G. The board may conduct an audit of registrants to verify compliance with the requirement for a renewal period. Upon request, a registrant shall provide documentation as follows:

1. Official transcripts showing credit hours earned; or
2. Certificates of participation.

H. Continuing education hours required by a disciplinary order shall not be used to satisfy renewal requirements.

Part III

Standards of Practice; Disciplinary Actions; Reinstatement

18VAC115-70-70. Standards of practice.

A. The protection of the public health, safety, and welfare and the best interest of the public shall be the primary guide in determining the appropriate professional conduct of all persons whose activities are regulated by the board.

B. Persons registered by the board shall:

1. Practice in a manner that is the best interest of the public and does not endanger the public health, safety, or welfare.
2. Be able to justify all services rendered to clients as necessary.
3. Practice only within the competency area for which they are qualified by training or experience.
4. Report to the board known or suspected violations of the laws and regulations governing the practice of registered peer recovery specialists.
5. Neither accept nor give commissions, rebates, or other forms of remuneration for referral of clients for professional services. Make appropriate consultations and referrals based on the best interest of clients.
6. Stay abreast of new developments, concepts, and practices which are necessary to providing appropriate services.
7. Document the need for and steps taken to terminate services when it becomes clear that the client is not benefiting from the relationship.

C. In regard to confidentiality and client records, persons registered by the board shall:

1. Not willfully or negligently breach the confidentiality between a practitioner and a client. A breach of confidentiality that is required or permitted by applicable law or beyond the control of the practitioner shall not be considered negligent or willful.

2. Disclose client records to others only in accordance with applicable law.
3. Maintain client records securely, inform all employees of the requirements of confidentiality and provide for the destruction of records that are no longer useful in a manner that ensures client confidentiality.
4. Maintain timely, accurate, legible, and complete written or electronic records for each client, to include dates of service and identifying information to substantiate treatment plan, client progress, and termination.

D. In regard to dual relationships, persons registered by the board shall:

1. Not engage in dual relationships with clients or former clients that are harmful to the client's well-being, or which would impair the practitioner's objectivity and professional judgment, or increase the risk of client exploitation. This prohibition includes such activities as providing services to close friends, former sexual partners, employees, or relatives; or engaging in business relationships with clients.
2. Not engage in sexual intimacies or romantic relationships with current clients. For at least five (5) years after cessation or termination of professional services, practitioners shall not engage in sexual intimacies or romantic relationships with a client or those included in collateral therapeutic services. Because sexual or romantic relationships are potentially exploitative, the practitioner shall bear the burden of demonstrating that there has been no exploitation. A client's consent to, initiation of or participation in sexual behavior or involvement with a practitioner does not change the nature of the conduct nor lift the regulatory prohibition.
3. Recognize conflicts of interest and inform all parties of obligations, responsibilities, and loyalties to third parties.

E. Upon learning of evidence that indicates a reasonable probability that another mental health service provider, as defined in § 54.1-2400.1 of the Code of Virginia, is or may be guilty of a violation of standards of conduct as defined in statute or regulation, persons registered by the board shall advise their clients of their right to report such misconduct to the Department of Health Professions in accordance with § 54.1-2400.4 of the Code of Virginia.

18VAC115-70-80. Grounds for revocation, suspension, restriction, or denial of registration.

In accordance with § 54.1-2400(7) of the Code of Virginia, the board may revoke, suspend, restrict, or decline to issue or renew a registration based upon the following conduct:

1. Conviction of a felony, or of a misdemeanor involving moral turpitude, or violation of or aid to another in violating any provision of Chapter 35 (§ 54.1-3500 et seq.) of Title 54.1 of the Code of Virginia, any other statute applicable to the practice of registered peer recovery specialists or any provision of this chapter;
2. Procuring or maintaining a registration, including submission of an application or applicable board forms, by fraud or misrepresentation;

3. Conducting one's practice in such a manner so as to make it a danger to the health and welfare of one's clients or to the public; or if one is unable to practice with reasonable skill and safety to clients by reason of illness, abusive use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of any mental or physical condition;
4. Violating or abetting another person in the violation of any provision of any statute applicable to the practice of peer recovery specialists or qualified mental health professionals, or any regulation in this chapter;
5. Performance of functions outside the board-registered area of competency;
6. Performance of an act likely to deceive, defraud, or harm the public;
7. Intentional or negligent conduct that causes or is likely to cause injury to a client;
8. Action taken against a health or mental health license, certification, registration, or application in Virginia or other jurisdiction;
9. Failure to cooperate with an employee of the Department of Health Professions in the conduct of an investigation; or
10. Failure to report evidence of child abuse or neglect as required in § 63.2-1509 of the Code of Virginia, or elder abuse or neglect as required in § 63.2-1606 of the Code of Virginia.

18VAC115-70-90. Late renewal and reinstatement.

A. A person whose registration has expired may renew it within one year after its expiration date by paying the late renewal fee and the registration fee as prescribed in 18VAC115-70-20 for the year in which the registration was not renewed and by providing documentation of completion of continuing education as prescribed in 18VAC115-70-60.

B. A person who fails to renew registration after one year or more shall:

1. Apply for reinstatement;
2. Pay the reinstatement fee for a lapsed registration;
3. Submit evidence of current certification as a peer recovery specialist as prescribed by DBHDS in 12VAC35-250-30.

C. A person whose registration has been suspended or who has been denied reinstatement by board order, having met the terms of the order, may submit a new application and fee for reinstatement of registration as prescribed in 18VAC115-70-20. Any person whose registration has been revoked by the board may, three years subsequent to such board action, submit a new application and fee for reinstatement of registration as prescribed in 18VAC115-70-20. The board in its discretion may, after an administrative proceeding, grant the reinstatement sought in this subsection.

